Case 17-26845 Doc 1 Filed 09/07/17 Entered 09/07/17 16:30:05 Desc Main

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| Fill in this information to identify your case: |  |                                      |
|---|--|--------------------------------------|
| United States Bankruptcy Court for the :        |  |                                      |
| NORTHERN District of ILLINOIS (State)           |  |                                      |
| Case Number (If known):                         | Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13 | ☐ Check if this is an amended filing |

## Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together-called a joint case-and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1:            | Identify Yourself  |                            |   |
|--------------------|--|----------------------------|---|
|                    |  | About Debtor 1:            | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. Your f          | full name  |                            |   |
| govern<br>identifi | he name that is on your<br>ment-issued picture<br>cation (for example, | Andrea First name Louise   | First name                                    |
| passpo             | river's license or ort).   | Middle name                | Middle name                                   |
| identifi           | our picture cation to your meeting e trustee.                          | Viverito Last name         | Last name                                     |
|                    |  | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III)                    |
| 2. All otl         | her names you  |                            |   |
| have years         | used in the last 8   | First name                 | First name                                    |
|                    | e your married or<br>n names.  | Middle name                | Middle name                                   |
|                    |  | Last name                  | Last name                                     |
|                    |  | First name                 | First name                                    |
|                    |  | Middle name                | Middle name                                   |
|                    |  | Last name                  | Last name                                     |
| your \$            | the last 4 digits of<br>Social Security                                | xxx - xx - <u>9612</u>     | XXX - XX                                      |
| Individ            | er or federal<br>lual Taxpayer<br>ication number                       | OR                         | OR  |
| iueii(ii           | iodaon number  | 9xx - xx                   | <b>9</b> xx - xx                              |

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Document Viverito Andrea Louise Debtor 1 Case Number (if known)

|    |  | About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):   |
|----|--|---|---|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | Business name  Business name  EIN  EIN  | I have not used any business names or EINs.  Business name  Business name  EIN  EIN   |
| 5. | Where you live   | 00.0 M 4 4  | If Debtor 2 lives at a different address:   |
|    |  | 29 Cour Montreal  Number Street   | Number Street   |
|    |  | Palos Hills IL 60465 City State ZIP Code  COOK County   | City State ZIP Code   |
|    |  | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from the one above, fill it in here. Note that the court will send any notices this mailing address. |
|    |  | Number Street   | Number Street   |
|    |  | P.O. Box  | P.O. Box  |
|    |  | City State ZIP Code   | City State ZIP Code   |
| 6. | Why you are choosing this district to file for bankruptcy.   | Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                    | Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                |
|    |  | have another reason. Explain. (See 28 U.S.C. § 1408   | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408   |
|    |  |   |   |
|    |  |   |   |

Debtor 1 Andrea Louise Document Viverito Page 3 of 54

Case Number (if known) \_

Last Name

| Pa  | Tell the Court About You                               | r Bankruptcy  | Case   |   |  |   |
|-----|--|---|--|---|--|---|
| 7.  | The chapter of the<br>Bankruptcy Code you              |   |  |   | required by 11 U.S.C. § 342(b) for Individuals page 1 and check the appropriate box.   |   |
|     | are choosing to file<br>under                          | ■ Chap  | ter 7  |   |  |   |
|     | undo   | ☐ Chap  | ter 11   |   |  |   |
|     |  | ☐ Chap  | ter 12   |   |  |   |
|     |  | ☐ Chap  | ter 13   |   |  |   |
| 8.  | How you will pay the fee                               | I requests for some submounts of the source | court for more detainself, you may pay with a pre-printed address to pay the fee in incation for Individuals are that my fee be well as a pre-printed address that my fee be well as a pudge may, but than 150% of the off he fee in installment | Is about how you may th cash, cashier's che on your behalf, your as.  Installments. If you che to Pay The Filing Fewaived (You may requise not required to, waitical poverty line that as.). If you choose this as. | Please check with the clerk's office in your pay. Typically, if you are paying the fee ck, or money order. If your attorney is attorney may pay with a credit card or check chose this option, sign and attach the er in Installments (Official Form 103A).  The est this option only if you are filing for Chapter 7. The your fee, and may do so only if your income is applies to your family size and you are unable to option, you must fill out the Application to Have the cells) and file it with your petition. |   |
| 9.  | Have you filed for bankruptcy within the last 8 years? | ■ No □ Yes.   | District None  | When  | Case Number  | _ |
|     |  |   |  |   | MM / DD / YYYY   |   |
|     |  |   | District None  | When  | Case Number  |   |
|     |  |   |  |   | MM / DD / YYYY   |   |
|     |  |   | District   | When  | Case Number  |   |
|     |  |   |  |   | MM / DD / YYYY   |   |
| 10. | Are any bankruptcy cases pending or being              | ■ No  |  |   |  |   |
|     | filed by a spouse who is<br>not filing this case with  | ☐ Yes.  | Debtor   |   | Relationship to you<br>Case Number, if known   |   |
|     | you, or by a business parter, or by affiliate?         |   | District   | with _  | MM / DD / YYYY   |   |
|     |  |   |  |   | Relationship to you  |   |
|     |  |   | District   | When  | Case Number, if known  |   |
| 11. | Do you rent your residence?                            | ■ No.<br>□ Yes.   | residence?   | 2.<br>tial Statement About an B   | ent against you and do you want to stay in your  Eviction Judgment Against You (Form 101A) and file it with  |   |

Entered 09/07/17 16:30:05 Case 17-26845 Doc 1 Filed 09/07/17 Desc Main Document Page 4 of 54 Andrea Louise Case Number (if known) Debtor 1 Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor No. Go to Part 4. of any full- or part-time Yes. Name and location of business business? A sole proprietorship is a business you operate as an Name of business, if any individual, and is not a separate legal entity such as a corporation, partnerhsip, or Street Number LLC. If you have more than one sole proprietorship, use a separate sheed and attach it to this petition. City Zip Code Check the appropriate box to describe your business: ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A)) ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) ■ None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent Chapter 11 of the balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these **Bankruptcy Code and** documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. For a definition of small business debtor, see No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in 11 U.S.C. § 101(51D). the Bankruptcy Code. Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention No. 14. Do you own or have any property that poses or is Yes alleged to pose a threat of imminent and indentifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building

that needs urgent repairs?

| What is the hazard?       |                           |       |          |
|---------------------------|---------------------------|-------|----------|
|                           |                           |       |          |
| If immediate attention is | needed, why is it needed? |       |          |
|                           |                           |       |          |
| Where is the property? _  | Number Street             |       |          |
|                           |                           |       |          |
|                           | City                      | State | ZIP Code |

Louise

Document

Debtor 1

Andrea

Page 5 of 54 Case Number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

| About | Debtor | 4. |
|-------|--------|----|
| About | Deploi | 1. |

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any,

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| ☐I ar | m not required | to rec  | eive a  | briefing | about |
|-------|----------------|---------|---------|----------|-------|
| cre   | dit counseling | g becai | use of: |          |       |

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any,

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. approved You must file a certificate from the agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to rece | ive a briefing about |
|---------------------------|----------------------|
| credit counseling because | se of:               |

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

> to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Document

Andrea Louise Viverito

Debtor 1

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Case Number (if known)

|     | riist Name  | Middle Name Last Name   |   |   |   |
|-----|---|---|---|---|---|
| Pai | 1 6: Answer These Questions   | for Reporting Purposes  |   |   |   |
| 16. | What kind of debts do you have?   |   | y consumer debts? Consumer debts! I primarily for a personal, family, or hou                              |   |   |
|     |   | • • • •   | y business debts? Business debts a estment or through the operation of the                                | •   |   |
|     |   | Yes. Go to line 17.   |   |   |   |
|     |   | 16c. State the type of debts you o  | owe that are not consumer debts or bu   | siness debts.   |   |
| 17. | Are you filing under Chapter 7?   | No. I am not filing under Cl  | hapter 7. Go to line 18.  |   | _ |
|     | Do you estimate that after any exempt property is   |   | ter 7. Do you estimate that after any eles are paid that funds will be available                          |   |   |
|     | excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | No.<br>□Yes.  |   |   |   |
| 18. | How many creditors do you estimate that you owe?  | ■ 1-49<br>□ 50-99<br>□ 100-199<br>□ 200-999                                       | ☐ 1,000-5,000<br>☐ 5,001-10,000<br>☐ 10,001-25,000  | ☐ 25,001-50,000<br>☐ 50,001-100,000<br>☐ More than 100,000  |   |
| 19. | How much do you estimate your assets to be worth?   | □ \$0-\$50,000 □ \$50,001-\$100,000 ■ \$100,001-\$500,000 □ \$500,001-\$1 million | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | □\$500,000,001-\$1 billion □\$1,000,000,001-\$10 billion □\$10,000,000,001-\$50 billion □More than \$50 billion |   |
| 20. | How much do you estimate your liabilities to be?  | □ \$0-\$50,000 □ \$50,001-\$100,000 ■ \$100,001-\$500,000 □ \$500,001-\$1 million | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion     |   |
| Pai | t 7: Sign Below   |   |   |   |   |
| For | you   | I have examined this petition, and correct.                                       | I declare under penalty of perjury that   | the information provided is true and  |   |
|     |   | •   | pter 7, I am aware that I may proceed, inderstand the relief available under ea                           | if eligible, under Chapter 7, 11,12, or 13 ich chapter, and I choose to proceed                                 |   |
|     |   | , ,   | I did not pay or agree to pay someone and read the notice required by 11 U.S.C                            | who is not an attorney to help me fill out C. § 342(b).   |   |
|     |   | I request relief in accordance with   | the chapter of title 11, United States C  | code, specified in this petition.   |   |
|     |   |   | in fines up to \$250,000, or imprisonme   | n money or property by fraud in connection ent for up to 20 years, or both.                                     |   |
|     |   | /s/ Andrea Louise Viv   | verito 🗶  | Signature of Debtor 2   |   |
|     |   | Executed on09/07/2017   | 7   | Executed on   |   |

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| Debtor 1 | Andrea     | Louise      | Viverito  | Case Number (if known) |
|----------|------------|-------------|-----------|------------------------|
|          | First Name | Middle Name | Last Name |                        |

For your attorney, if you are represented by one

if you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| 🗶 /s/ Steven Scott Camp                  | Date     | Date:   | 09/07/2017  |
|--|----------|---------|-------------|
| Signature of Attorney for Debtor         |          | MM / DI | D / YYYY    |
| Steven Scott Camp                        |          |         |             |
| Printed name                             |          |         |             |
| Geraci Law L.L.C.                        |          |         |             |
| Firm name                                |          |         | <del></del> |
| 55 E. Monroe St., #3400                  |          |         |             |
| Number Street                            |          |         | <del></del> |
|  |          |         |             |
|  |          |         |             |
| Chicago                                  | IL       | 6060    | 3           |
|  | IL State |         | 3<br>Code   |
| Chicago City  Contact Phone 312-332-1800 | State    | ZIP     | Code        |
| City 242 222 4800                        | State    | ZIP     |             |

| Fill in this in           | formation to identi  | fy your case:                     |                        |
|---------------------------|----------------------|-----------------------------------|------------------------|
| Debtor 1                  | Andrea               | Louise                            | Viverito               |
|                           | First Name           | Middle Name                       | Last Name              |
| Debtor 2                  |                      |                                   |                        |
| (Spouse, if filing)       | First Name           | Middle Name                       | Last Name              |
| United States             | Bankruptcy Court for | the : <u>NORTHERN</u> District of | f_ILLINOIS_<br>(State) |
| Case Number<br>(If known) |                      |                                   |                        |

## Official Form 106Sum

### **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Summarize Your Assets  |  |
|--|--|
|  | Your assets<br>Value of what you own                             |
| Schedule A/B: Property (Official Form 106A/B)     1a. Copy line 55, Total real estate, from Schedule A/B   | <u>\$ 0</u>  |
| 1b. Copy line 62, Total personal property, from Schedule A/B   | \$ 156,716   |
| 1c. Copy line 63, Total of all property on Schedule A/B  | \$ 156,716   |
|  |  |
| Part 2: Summarize Your Liabilities   |  |
|  |  |
|  | Your liabilities<br>Amount you owe                               |
| <ol> <li>Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the little of the</li></ol> | Amount you owe   |
|  | Amount you owe    D  |
| <ul> <li>2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the list.</li> <li>3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)</li> </ul>  | Amount you owe  \$171,012  \$171,012  Schedule E/F               |
| <ul> <li>2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the lands.</li> <li>3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)</li> <li>3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of States.</li> </ul>  | Amount you owe \$171,012 sst page of Part 1 of Schedule D        |
| <ul> <li>2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the lands.</li> <li>3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)</li> <li>3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of States.</li> </ul>  | Amount you owe  \$171,012  \$171,012  Schedule E/F               |
| 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of 3c.  Part 3:  Summarize Your Liabilities  4. Schedule I: Your Income (Official Form 106I)   | Amount you owe \$171,012   \$171,012   \$0   \$21,334   \$21,334 |
| <ul> <li>2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)</li> <li>3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of S</li> <li>3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of S</li> <li>3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of S</li> <li>3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of S</li> </ul>  | Amount you owe \$171,012   \$171,012   \$0   \$21,334   \$21,334 |

Debtor 1 Andrea Louise Document Viverito Page 9 of 54
First Name Middle Name Last Name Page 9 of 54
Case Number (if known)

| Part 4: Answer These Questions for Administrative and Statistical Records  |                                      |  |  |  |  |
|--|--------------------------------------|--|--|--|--|
| 6. Are you filing for bankruptcy under Chapter 7, 11 or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to Yes   | the court with your other schedules. |  |  |  |  |
| <ul> <li>7. What kind of debt do you have?</li> <li>Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.</li> <li>Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.</li> </ul> |                                      |  |  |  |  |
| 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. \$3,28   |                                      |  |  |  |  |
| 9. Copy the following special categories of claims from Part 4, line 6 of <i>Schedule E/F</i> :  | Total claim                          |  |  |  |  |
| From Part 4 of Schedule E/F, copy the following:   |                                      |  |  |  |  |
| 9a. Domestic support obligations (Copy line 6a.)   | \$_0.00                              |  |  |  |  |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$_0.00                              |  |  |  |  |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$_0.00                              |  |  |  |  |
| 9d. Student loans. (Copy line 6f.)   | \$_0.00                              |  |  |  |  |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)   | \$_0.00                              |  |  |  |  |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)   | <u>\$_0.00</u>                       |  |  |  |  |
| 9g. <b>Total.</b> Add lines 9a through 9f.   | \$_0.00                              |  |  |  |  |

| Fill in this in                 | formation to identify you                           |                        |  | Entered 09/07/17<br>0 of 54          | ' 16:30:05 Desc  | : Main                 |
|---------------------------------|---|------------------------|--|--------------------------------------|--|------------------------|
|                                 | normation to identity you                           | ir case and this ming  | j.   | 0 01 54                              |  |                        |
| Debtor 1                        | Andrea  | Louise                 | Viverito   |                                      |  |                        |
| D.H. O                          | First Name  | Middle Name            | Last Name  |                                      |  |                        |
| Debtor 2<br>(Spouse, if filing) | First Name  | Middle Name            | Last Name  |                                      |  |                        |
| United States                   | Pankruntov Court for the                            | NODTHERN District      | of ILLINOIS  |                                      |  |                        |
| Officed States                  | Bankruptcy Court for the :                          | NORTHERN DISTRICT      | (State)  |                                      |  | Check if this is an    |
| Case Number<br>(If known)       | ·   |                        |  |                                      |  | amended filing         |
| Official F                      | orm 106A/B  |                        |  |                                      |  | amonada ming           |
|                                 | e A/B: Proper                                       | tv                     |  |                                      |  | 12/15                  |
|                                 |   |                        | asset only once. If an asset                                   | fits in more than one catego         | ry list the asset in the                               | 12/15                  |
| _                               |   |                        | curate as possible. If two ma                                  | <del>-</del>                         | = '  |                        |
| =                               | supplying correct inform<br>ur name and case number | =                      | e is needed, attach a separat<br>r every question              | e sheet to this form. On the t       | op of any additional                                   |                        |
|                                 |   |                        | er Real Esate You Own or Hav                                   | re an Interest In                    |  |                        |
| I GI G II                       |   |                        | ny residence, building, land,                                  |                                      |  |                        |
| □ No.                           | vii oi nave any legal of et                         | quitable interest in a | ny residence, building, lund,                                  | or similar property.                 |  |                        |
| Yes.                            | Describe  |                        |  |                                      |  |                        |
|                                 |   |                        | What is the property? Check                                    | k all that apply.                    | Do not deduct secured cla<br>the amount of any secured | ·                      |
| 29 Cour N                       |   | arintion.              | Single-family home   | a                                    | Creditors Who Have Clair                               |                        |
| Street addit                    | ess, if available, or other desc                    | приоп                  | Duplex or multi-unit buildin  Condominium or cooperati         | _                                    | Current value of the                                   | Current value of the   |
|                                 |   |                        | Manufactured or mobile ho                                      |                                      | entire property?                                       | portion you own?       |
| Palos Hill                      | S   | IL 60465               | Land   |                                      | <b>s</b> 150,934.00                                    | <b>s</b> 150,934.00    |
| City                            | Si  | tate ZIP Code          | Investment property  |                                      | <u> </u>   |                        |
|                                 |   |                        | Timeshare  |                                      | Describe the nature of                                 | your ownership         |
| County                          |   |                        | Other  |                                      | interest (such as fee si                               | = =                    |
|                                 |   |                        | Who has an interest in the p                                   | property? Check one.                 | the entireties, or a life of                           | estat), if known.      |
|                                 |   |                        | Debtor 1 only  |                                      |  |                        |
|                                 |   |                        | Debtor 2 only  |                                      | Observation 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1      |                        |
|                                 |   |                        | Debtor 1 and Debtor 2 only                                     |                                      | (see instructions)                                     | ommunity property      |
|                                 |   |                        | At least one of the debtors                                    |                                      |  |                        |
|                                 |   |                        | Other information you wish<br>property identification num      | to add about this item, such<br>ber: | as local   |                        |
|                                 |   |                        | , ,,,,   |                                      |  |                        |
|                                 |   | -                      | ır entries fro Part 1, includin                                |                                      |  |                        |
| you nave a                      | ttached for Part 1. Write                           | tnat number nere       |  |                                      | <del></del> /  | \$150,934.00           |
| Part 2:                         | Describe Your Vehicles                              |                        |  |                                      |  |                        |
| Do you own le                   | agge or house legal or one                          | uitable interest in an | v vahialaa whathar thay ara                                    | registered or not2 holydo or         | av vohiolog  |                        |
| =                               | - ·   |                        | y vehicles, whether they are<br>o report it on Schedule G: Exc | =                                    | -  |                        |
| 03. Cars, vans                  | s, trucks, tractors, sport (                        | utility vehicles, moto | orcycles   |                                      |  |                        |
| No.                             |   |                        |  |                                      |  |                        |
| Yes.                            | Describe //ake:                                     | Toyota                 | Who has an interest in the p                                   | property? Check one                  | B  |                        |
|                                 |   | RAV4                   | Debtor 1 only  | oroperty? Check one.                 | Do not deduct secured cla<br>the amount of any secured |                        |
|                                 | Model:  |                        | Debtor 2 only  |                                      | Creditors Who Have Clain                               | ns Secured by Property |
| Υ                               | ⁄ear:   | 1999                   | Debtor 1 and Debtor 2 only                                     | ,                                    | Current value of the entire property?                  | Current value of the   |
| A                               | Approximate Mileage:                                | 150,000                | At least one of the debtors                                    | and another                          |  | portion you own?       |
| C                               | Other information:                                  |                        | □ <b></b>  |                                      | \$1,732.00   | \$1,732.00             |
| F                               | 1999 Toyota RAV4 with ov                            | ver 150,000            | Check if this is commu instructions)                           | nity property (see                   |  |                        |
| 1                               | miles.  |                        |  |                                      |  |                        |
| _                               |   |                        | _  |                                      |  |                        |

Debtor 1

<u>And</u>rea

Case 17-26845

Doc 1

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Document Page 11 of 54 Pumber (if known)

Desc Main

First Name Middle Name

|                                  | s: Boats, trailers, mo  | r homes, ATVs and other recreational vehicles, other vehicles, and accessories<br>tors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories |         |  |
|----------------------------------|---|---|---------|--|
| 5. Add the do                    | ollar value of the  | portion you own for all of your entries fro Part 2, including any entries for pages   |         | \$ 1,732.00  |
| you have a                       | attached for Part   | 2. Write that number here>  |         | ψ 1,7 <b>52.00</b>   |
| Part 3:                          | Describe Your Pe  | ersonal and Household Items   |         |  |
| Do you own o                     | or have any legal   | or equitable interest in any of the following items?  |         | Current value of the portion you own? Do not deduct secured claims or exemptions |
|                                  | old goods and fur<br>s: Major appliances,                           | nishings<br>furniture, linens, china, kitchenware   |         |  |
| Yes                              | . Describe  | Furniture, linens, small appliances, table & chairs, bedroom set  | \$1,000 | \$ 1,000.00  |
|                                  | s: Televisions and ra   | dios; audio, video, stereo, and digital equipment; computers, printers, scanners; music s including cell phones, cameras, media players, games                    |         | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,  |
| Yes                              | . Describe  | Flat screen TV, computer, printer, music collection, cell phone   | \$300   | s 300.00   |
|                                  | s: Antiques and figur   | rines; paintings, prints, or other artwork; books, pictures, or other art objects; collections; other collections, memorabilia, collectibles                      |         | <u> </u>   |
| Yes                              | Describe  |   |         | \$0.00   |
| Examples                         | nt for sports and<br>s: Sports, photograp<br>ks; carpentry tools; i | hic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes   |         |  |
| Yes                              | . Describe  |   |         | \$0.00   |
| 10. Firearms Examples No.        |   | iguns, ammunition, and related equipment  |         |  |
| Yes                              | . Describe  |   |         | \$0.00   |
| 11. Clothes  Examples  No.       | s: Everyday clothes,  | furs, leather coats, designer wear, shoes, accessories  |         |  |
| Yes                              | . Describe  | Everyday clothes shoes, accessories   | \$250   | \$250.00   |
| 12. Jewelry Examples gold, silve |   | costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,  |         |  |
| Yes                              | . Describe  | costume jewelry, engagement rings, wedding rings, watches,  | \$200   | \$ <u>200.0</u> 0  |
| 13. Non-farm<br>Examples<br>No.  | n animals<br>s: Dogs, cats, birds,                                  | horses  |         |  |
| Yes                              | . Describe  |   |         | \$0.00   |

Debtor 1

Andrea

Case 17-26845

Doc 1 Filed 09/07/17 Entered 09/07/17 16:30:05

Document Page 12 of 54 umber (if known)

Desc Main

| First Name | Middle None |
|------------|-------------|

| 14. | Any other         | personal and ho                     | ousehold items you did not alread  | ly list, including any health aids you did not list                                |                                   |           |                    |
|-----|-------------------|-------------------------------------|--|--|-----------------------------------|-----------|--------------------|
|     | Yes.              | Describe                            |  |  |                                   | \$        | 0.00               |
|     |                   |                                     | of your entries from Part 3, includ  | ling any entries for pages you have attached                                       |                                   |           | \$1,750.00         |
|     |                   | escribe Your Fin                    |  |  |                                   |           |                    |
|     |                   | have any legal                      | or equitable interest in any of the  | e following?   | Current                           | value o   | of the             |
|     |                   |                                     |  |  | <b>portion</b> Do not de or exemp | educt sec | n?<br>cured claims |
| 16. | Examples: I       | Money you have in                   | your wallet, in your home, in a safe dep   | posit box, and on hand when you file your petition                                 |                                   |           |                    |
|     |                   |                                     |  |  |                                   | \$        | 0.00               |
| 17. |                   | Checking, savings                   | or other financial accounts; certificates f you have multiple accounts with the sa                                       | of deposit; shares in credit unions, brokerage houses, ame institution, list each. |                                   |           |                    |
|     | Yes.              | Describe                            | Account Type: Checking Account   | Institution name: First Midwest Bank   |                                   | \$        | 100.00             |
|     |                   |                                     | Checking Account   | Chase  |                                   | \$        | 1,500.00           |
| 18. | Bonds, mu         | tual funds, or p                    | ublicly traded stocks  |  |                                   | \$        | 1,600.00           |
|     | No.               |                                     | ment accounts with brokerage firms, mo   | oney market accounts   |                                   |           |                    |
|     | Yes.              | Describe                            | Institution or issuer name:  |  |                                   | \$        | 0.00               |
| 19. | Non-public<br>No. |                                     |  | d unincorporated businesses, including an interest in                              |                                   |           |                    |
|     | Yes.              | Describe                            | Name of Entity and Percent of Ow   | rnership:  |                                   | \$        | 0.00               |
| 20. | Negotiable        | instruments includ                  | e bonds and other negotiable and<br>e personal checks, cashiers' checks, pro-<br>re those you cannot transfer to someone | omissory notes, and money orders.  |                                   |           |                    |
|     | Yes.              | Describe                            | Issuer name:   |  |                                   | ¢         | 0.00               |
| 21. | Examples: I       | or pension acc                      |  | gs accounts, or other pension or profit-sharing plans                              |                                   | <b>\$</b> | 0.00               |
|     | No. Yes.          | Describe                            | Type of account and Institution na   | me:  |                                   |           |                    |
| 22. | Security de       | eposits and pre                     | payments   |  |                                   | \$        | 0.00               |
|     | Your share        | of all unused depo                  | sits you have made so that you may col<br>andlords, prepaid rent, public utilities (ele                                  |  |                                   |           |                    |
|     | Yes.              | Describe                            | Institution name or individual:  |  |                                   | \$        | 0.00               |
| 23. | Annuities (       | A contract for a                    | periodic payment of money to yo  | ou, either for life or for a number of years)                                      |                                   |           |                    |
|     | Yes.              | Describe                            | Issuer name and description:   |  |                                   | s         | 0.00               |
| 24. |                   | an education I<br>§ 530(b)(1), 529A |  | BLE program, or under a qualified state tuition program.                           |                                   | <b>V</b>  |                    |
|     | Yes.              | Describe                            | Institution name and description. S  | Separately file the records of any interests.11 U.S.C. § 521(c):                   |                                   | \$        | 0.00               |
| 25. | Trusts, equ       | itable or future                    | interests in property (other than  | anything listed in line 1), and rights or powers                                   |                                   | Ψ         | <u> </u>           |
|     | Yes.              | Describe                            |  |  |                                   | \$        | 0.00               |
|     |                   |                                     |  |  |                                   |           |                    |

35. Any financial assets you did not already list

\$700.00 paid to Geraci Law for pre-filing services.

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached

for Part 4. Write that number here .....

Yes. Describe.....

No.

| ebtor | 1 Andr     |                       | .7-20845 DOC 1  Middle Name       | L FILEO 09/07/17<br>Document          | Page 13 of                 | J9/07/17 16:30:05<br>Pape Number (if known)<br>I 54 | Desc Mair  | <u>1</u>     |          |
|-------|------------|-----------------------|-----------------------------------|---------------------------------------|----------------------------|---|------------|--------------|----------|
|       |            |                       | emarks, trade secrets, and        |                                       |                            |   |            |              |          |
|       |            | : Internet domain n   | ames, websites, proceeds from     | royalties and licensing agreemen      | ıts                        |   |            |              |          |
|       | No.        |                       |                                   |                                       |                            |   |            |              |          |
|       | Yes.       | Describe              |                                   |                                       |                            |   |            | ¢            | 0.00     |
| 27. L | icenses.   | franchises, and       | l other general intangibles       |                                       |                            |   |            | Ψ            |          |
|       |            |                       |                                   | association holdings, liquor licens   | es, professional license   | es  |            |              |          |
|       | No.        |                       |                                   |                                       |                            |   |            |              |          |
|       | Yes.       | Describe              |                                   |                                       |                            |   |            |              |          |
|       |            |                       |                                   |                                       |                            |   |            | \$           | 0.00     |
|       |            |                       |                                   |                                       |                            |   |            |              |          |
| wone  | y or pro   | perty owed to yo      | ou ?                              |                                       |                            |   |            | value of the | е        |
|       |            |                       |                                   |                                       |                            |   |            | duct secured | d claims |
|       |            |                       |                                   |                                       |                            |   | or exempti | ons          |          |
| 28 T  | av refun   | ds owed to you        |                                   |                                       |                            |   |            |              |          |
| 20. 1 | No.        | as owea to you        |                                   |                                       |                            |   |            |              |          |
|       | Yes.       | Describe              |                                   |                                       |                            |   |            |              |          |
|       | res.       | Describe              |                                   |                                       |                            |   |            | \$           | 0.00     |
| 29. F | amily su   | pport                 |                                   |                                       |                            |   |            | <b>-</b>     |          |
|       | -          |                       | sum alimony, spousal support, o   | child support, maintenance, divorc    | ce settlement, property    | settlement  |            |              |          |
|       | No.        |                       |                                   |                                       |                            |   |            |              |          |
|       | Yes.       | Describe              |                                   |                                       |                            |   |            |              |          |
|       | \4l        |                       |                                   |                                       |                            |   |            | \$           | 0.00     |
|       |            | ounts someone         | •                                 | sability benefits, sick pay, vacation | nav workers' compen        | neation   |            |              |          |
|       |            |                       | aid loans you made to someone     |                                       | i pay, workers compen      | isation,  |            |              |          |
|       | No.        |                       |                                   |                                       |                            |   |            |              |          |
|       | Yes.       | Describe              |                                   |                                       |                            |   |            |              |          |
|       |            |                       |                                   |                                       |                            |   |            | \$           | 0.00     |
|       |            | insurance police      |                                   | a account (LICA), aradit hamaayya     | or'o or rontor'o inquiror  | 200   |            |              |          |
|       | No.        | . nealth, disability, | Company Name & Benefic            | s account (HSA); credit, homeown      | ler s, or renter s insurar | ice   |            |              |          |
|       | Yes.       | Describe              | Company Name & Benefic            | Jary.                                 |                            |   |            |              |          |
|       |            | Describe              |                                   |                                       |                            |   |            | \$           | 0.00     |
| 32. A | ny intere  | est in property t     | hat is due you from someo         | ne who has died                       |                            |   |            |              |          |
|       | If you are | the beneficiary of a  | living trust, expect proceeds fro | om a life insurance policy, or are o  | currently entitled to rece | eive  |            |              |          |
|       |            | ecause someone h      | nas died.                         |                                       |                            |   |            |              |          |
|       | No.        |                       |                                   |                                       |                            |   |            |              |          |
|       | Yes.       | Describe              |                                   |                                       |                            |   |            | ¢            | 0.00     |
| 33. C | laims ac   | ainst third parti     | es, whether or not you hav        | ve filed a lawsuit or made a d        | lemand for paymen          |   |            | \$           | 0.00     |
|       | _          |                       | yment disputes, insurance claim   |                                       | iomana ioi paymon          |   |            |              |          |
|       | No.        |                       |                                   |                                       |                            |   |            |              |          |
|       | Yes.       | Describe              |                                   |                                       |                            |   |            |              |          |
|       | _          |                       |                                   |                                       |                            |   |            | \$           | 0.00     |
| 34. C | ther con   | ntingent and unli     | iquidated claims of every n       | nature, including counterclai         | ms of the debtor ar        | nd rights   |            |              |          |
|       | No.        |                       |                                   |                                       |                            |   |            |              |          |
|       | Yes.       | Describe              |                                   |                                       |                            |   |            |              |          |

0.00

700.00

\$2,300.00

\$700

Debtor 1

Andrea

Case 17-26845

Doc 1

Desc Main

0.00

Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Yes. Current value of the portion you own? Do not deduct secured claims or exemptions 38. Accounts receivable or commissions you already earned No. Yes. Describe..... 0.00 39. Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices No. Yes. Describe..... 0.00 40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade Describe..... 0.00 41. Inventory No. Describe..... 0.00 42. Interests in partnerships or joint ventures Name of Entity and Percent of Ownership: Yes. Describe..... 0.00 43. Customer lists, mailing lists, or other compilations Yes. Describe..... 0.00 44. Any business-related property you did not already list No. Yes. Describe..... 0.00 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached \$ 0.00 for Part 5. Write that number here ----Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Yes. Describe..... 0.00 47. Farm animals Examples: Livestock, poultry, farm-raised fish No. Describe..... Yes. 0.00 48. Crops-either growing or harvested No. Yes. Describe..... 0.00 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade No. Yes. Describe.....

Debtor 1 Andrea Case 17-26845 Doc 1 Filed 09/07/17 Entered 09/07/17 16:30:05 Desc Main Page 15 of P

| 50. | Farm and fishing supplies                                  | chemicals, and feed  |                  |               |
|-----|--|--|------------------|---------------|
|     | Yes. Describe  |  |                  | 1             |
| 51. | Any farm- and commercial                                   | fishing-related property you did not already I             | list             | \$0.00        |
|     | No.  |  |                  | 1             |
|     | Yes. Describe  |  |                  | \$0.00        |
|     |  | of your entries from Part 6, including any entr<br>er here |                  | \$0.00        |
| _   |  |  |                  |               |
| i   | Describe All Prope   | erty You Own or Have an Interest in That You Did           | d Not List Above |               |
| 53. | Do you have other propert<br>Examples: Season tickets, cou | y of any kind you did not already list?                    |                  |               |
|     | No.  | may dub memberanip   |                  |               |
|     | Yes. Describe  |  |                  | \$0.00        |
| 54  | Add the dollar value of all of                             | of your entries from Part 7. Write that number             | r here>          | \$0.00        |
| •   |  |  |                  |               |
| i   | List the Totals of   | Each Part of this Form                                     |                  |               |
| 55. | Part 1: Total real estate, lin                             | e 2  |                  | \$ 150,934.00 |
| 56. | Part 2: Total vehicles, line                               | 5  | \$ 1,732.00      |               |
| 57. | Part 3: Total personal and                                 | nousehold items, line 15                                   | \$ 1,750.00      |               |
| 58. | Part 4: Total financial asse                               | ts, line 36  | \$ 2,300.00      |               |
| 59. | Part 5: Total business-related                             | ed property, line 45                                       | \$ 0.00          |               |
| 60. | Part 6: Total farm- and fish                               | ing-related property, line 52                              | \$ 0.00          |               |
| 61. | Part 7: Total other property                               | not listed, line 54  | \$ 0.00          |               |
| 62. | Total personal property. Ad                                | d lines 56 through 61                                      | \$ 5,782.00      | \$ 5,782.00   |
|     |  |  |                  |               |
| 63. | Total of all property on Sch                               | edule A/B. Add line 55 + line 62                           |                  | \$156,716.00  |
|     |  |  |                  |               |

| Fill in this information to identify your case: |                        |                                     |                  |  |  |
|---|------------------------|-------------------------------------|------------------|--|--|
| Debtor 1  | Andrea                 | Louise                              | Viverito         |  |  |
|   | First Name             | Middle Name                         | Last Name        |  |  |
| Debtor 2  |                        |                                     |                  |  |  |
| (Spouse, if filing)                             | First Name             | Middle Name                         | Last Name        |  |  |
| United States                                   | Bankruptcy Court for t | the : <u>NORTHERN</u> District of _ | ILLINOIS (State) |  |  |
| Case Number                                     | r                      |                                     |                  |  |  |
| (If known)                                      |                        |                                     |                  |  |  |

## Official Form 106C

### Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions-such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds-may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

|                         | emptions are you claiming? Check<br>ming state and federal nonbankrupt |                                      |   |                                    |
|-------------------------|--|--------------------------------------|---|------------------------------------|
| _                       | ming federal exemptions. 11 U.S.C.                                     |                                      | 8 322(0)(3)   |                                    |
| You are clair           | ming rederal exemptions. 11 0.5.C.                                     | § 522(D)(Z)                          |   |                                    |
| . For any propert       | y you list on Schedule A/B that yo                                     | ou claim as exempt, fill in t        | the information below.  |                                    |
| •                       | on of the property and line on hat lists this property                 | Current value of the portion you own | Amount of the exemption you claim                               | Specific laws that allow exemption |
|                         |  | Copy the value from<br>Schedule A/B  | Check only one box for each exemption                           |                                    |
| Brief description:      | 29 Cour Montreal Palos Hills IL<br>60465                               | \$150,934                            | \$15,000  | 735 ILCS 5/12-901 - \$15,000.00    |
| Line from Schedule A/B: | 01   |                                      | 100% of fair market value, up to any applicable statutory limit |                                    |
| Brief<br>description:   | 1999 Toyota RAV4 with over 150,000 miles.                              | \$_1,732                             | <b>\$</b> 2,400   | 735 ILCS 5/12-1001(c) - \$2,400.00 |
| Line from Schedule A/B: | 03   |                                      | 100% of fair market value, up to any applicable statutory limit |                                    |
| Brief description:      | Furniture, linens, small appliances, table & chairs, bedroom set       | \$1,000                              | \$  | 735 ILCS 5/12-1001(b) - \$1,000.00 |
| Line from Schedule A/B: | 06   |                                      | 100% of fair market value, up to any applicable statutory limit |                                    |
| Brief<br>description:   | Flat screen TV, computer, printer, music collection, cell phone        | \$_ 300                              | <b></b>   | 735 ILCS 5/12-1001(b) - \$300.00   |
| Line from Schedule A/B: | <u>07</u>  |                                      | 100% of fair market value, up to any applicable statutory limit |                                    |
|                         |  |                                      |   |                                    |
| Official Form 106C      | Record # 751406  | Schedule C: T                        | he Property You Claim as Exempt                                 | Page 1 of 2                        |

Debtor 1 Andrea

First Name

Louise

Document

Page 17 of 54 Case Number (if known)

Middle Name

Last Name

|    | Part 2# Addit           | ional Page   |                                      |   |                                      |
|----|-------------------------|--|--------------------------------------|---|--------------------------------------|
|    | -                       | on of the property and line on hat lists this property     | Current value of the portion you own | Amount of the exemption you claim                               | Specific laws that allow exemption   |
|    |                         |  | Copy the value from<br>Schedule A/B  | Check only one box for each exemption                           |                                      |
|    | Brief description:      | Everyday clothes shoes, accessories                        | \$ <u>250</u>                        | <b></b> \$  | 735 ILCS 5/12-1001(a),(e) - \$250.00 |
|    | Line from Schedule A/B: | 11   |                                      | 100% of fair market value, up to any applicable statutory limit |                                      |
|    | Brief description:      | costume jewelry, engagement rings, wedding rings, watches, | \$200                                | <b></b> \$  | 735 ILCS 5/12-1001(a),(e) - \$200.00 |
|    | Line from Schedule A/B: | 12   |                                      | 100% of fair market value, up to any applicable statutory limit |                                      |
|    | Brief description:      | Checking Account, First Midwest Bank , 100.00              | \$ <u>100</u>                        | <b></b> \$  | 735 ILCS 5/12-1001(b) - \$100.00     |
|    | Line from Schedule A/B: | <u>17</u>  |                                      | 100% of fair market value, up to any applicable statutory limit |                                      |
|    | Brief description:      | Checking Account, Chase , 1,500.00                         | \$1,500                              | <b></b> \$  | 735 ILCS 5/12-1001(b) - \$1,500.00   |
|    | Line from Schedule A/B: | 17   |                                      | 100% of fair market value, up to any applicable statutory limit |                                      |
|    | Brief description:      | \$700.00 paid to Geraci Law for pre-filing services.       | \$ <del>7</del> 00                   | <b></b>   | 735 ILCS 5/12-1001(b) - \$700.00     |
|    | Line from Schedule A/B: | 35   |                                      | 100% of fair market value, up to any applicable statutory limit |                                      |
| 3. | Are you claimin         | g a homestead exemption of more                            | e than \$155,675?                    |   |                                      |
|    | (Subject to adjus       | stment on 4/01/16 and every 3 year                         | rs after that for cases filed o      | n or after the date of adjustment .)                            |                                      |
|    | No.                     |  |                                      |   |                                      |
|    |                         | acquire the property covered by the                        | ne exemption within 1,215 d          | lays before you filed this case?                                |                                      |
|    | □ No                    |  |                                      |   |                                      |
|    | ∐ Yes.                  |  |                                      |   |                                      |
|    |                         |  |                                      |   |                                      |
|    |                         |  |                                      |   |                                      |
|    |                         |  |                                      |   |                                      |
|    |                         |  |                                      |   |                                      |
|    |                         |  |                                      |   |                                      |
|    |                         |  |                                      |   |                                      |
|    |                         |  |                                      |   |                                      |
|    |                         |  |                                      |   |                                      |
|    |                         |  |                                      |   |                                      |
|    |                         |  |                                      |   |                                      |
|    |                         |  |                                      |   |                                      |
|    |                         |  |                                      |   |                                      |
|    |                         |  |                                      |   |                                      |
|    |                         |  |                                      |   |                                      |
| 0  | fficial Form 106C       | Record # 751406  | Schedule C: T                        | he Property You Claim as Exempt                                 | Page 2 of 2                          |

| Fill in this i                                     | nformation to identif   |   | oc 1  | Entered 09/07/2<br>8 of 54         | 17 16:30:05   | Desc Main  |                                       |
|--|---|---|---|------------------------------------|---|--|---------------------------------------|
| Debtor 1   | Andrea  | Louise  | Viverito  |                                    |   |  |                                       |
|  | First Name  | Middle Name   | e Last Name   |                                    |   |  |                                       |
| Debtor 2   |   |   |   | -                                  |   |  |                                       |
| (Spouse, if filing)                                | First Name  | Middle Name   | e Last Name   |                                    |   |  |                                       |
| United States                                      | s Bankruptcy Court for th   | ne : <u>NORTHERN</u>  | _ District of _ <u>ILLINOIS</u>   |                                    |   |  |                                       |
| Case Numbe   | ar  |   | (State)   |                                    |   | Check if thi   | s is an                               |
| (If known)   |   |   |   |                                    |   | amended fi   | ling                                  |
| Official F   | orm 106D  |   |   |                                    |   |  |                                       |
|  |   | . Who How   | e Claims Secured by   | Droporty                           |   |  | 12/15                                 |
| nformation. If dditional pag  1. Do any cre  No. C | more space is neede<br>es, write your name<br>editors have claims s | ed, copy the Addi<br>and case number<br>secured by your p<br>omit this form to th |   | entries, and attach it to this     | form. On the top of a   | ny   |                                       |
| Part 1:  | List All Secured Clair  | ns  |   |                                    |   |  |                                       |
| for each of As much                                | claim. If more than or<br>as possible, list the cl<br>Financial LLC | ne creditor has a p   | nan one secured claim, list the creditor particular claim, list the other creditor cal order according to the creditors of the property that secured the property that secure 29 Cour Montreal Palos Hills IL | rs in Part 2. name. res the claim: | Amount of claim Do not deduct the value of collateral \$ 171,012.00 | Value of collateral that supports this claim \$ 150,934.00 | Unsecured portion If any \$ 20,078.00 |
| Rapid City   | Street  City  | SD 57709 State Zip Code   | As of the date you file, the claim Contingent Unliquidated Disputed   | ı is: Check all that apply.        |   |  |                                       |
| Who owe  | s the debt? Check one   |   | Nature of Lien. Check all that app  | oly.                               |   |  |                                       |
| =  | 1 only  |   | An agreement you made (such   | as mortgage or secured             |   |  |                                       |
| Debto  | •   |   | car loan)   | and the state of the Parish        |   |  |                                       |
| =  | r 1 and Debtor 2 only<br>st one of the debtors and                  | another   | Statutory lien (such as tax lien,  Judgment lien from a lawsuit   | mechanic's lien)                   |   |  |                                       |
| Check  | k if this claim relates to  |   | Other (including a right to offset  | )                                  |   |  |                                       |
| Data Data  | t was incurred  |   | Last 4 digits of account number   | <u> </u>                           |   |  |                                       |
| Date Deb   |   | ified for a Debt Th   | at You Already Listed   |                                    |   |  |                                       |
| Part 2:  | List Others to Be Not   |   |   |                                    |   |  |                                       |

Add the dollar value of your entries in Column A on this page. Write that number here:

\$<u>171,012.00</u>

| Fill in             | thic inf              |   |                                  | Filed 00/07/17  | Entered 09/07/17 16:30:05  | Desc Main         |                    |
|---------------------|-----------------------|---|----------------------------------|---|--|-------------------|--------------------|
| FIII III            | unis ini              | ormation to identify your case                                    | 9:                               |   | 9 of 54  |                   |                    |
| Debtor              | 1                     | Andrea L  | ouise                            | Viverito  |  |                   |                    |
|                     |                       | First Name Mi   | iddle Name                       | Last Name   |  |                   |                    |
| Debtor<br>(Spouse,  |                       | First Name Mi   | iddle Name                       | Last Name   |  |                   |                    |
| (ороазс,            | ii iiiiig)            | THIS CHAINC WI  | iddic Ivanic                     | Lastivanie  |  |                   |                    |
| United              | States E              | Bankruptcy Court for the : <u>NORT</u>                            | HERN_ Distric                    | ct of <u>ILLINOIS</u><br>(State)                                |  |                   |                    |
| Case N              | Number .              |   |                                  |   |  | ☐ Check if        |                    |
|                     | -                     | 4005/5  |                                  |   |  | amended           | d filing           |
| <u> Milicia</u>     | al Fo                 | orm 106E/F  |                                  |   |  |                   |                    |
| e as cor            | nplete<br>ther pa     | rty to any executory contracts                                    | e Part 1 for cr<br>s or unexpire | reditors with PRIORITY claims<br>ad leases that could result in | s and Part 2 for creditors with NONPRIORITY<br>a claim. Also list executory contracts on <i>Sche</i><br><i>xpired Leases</i> (Official Form 106G). Do not in | edule             | 12/15              |
| eeded, d            | opy th                | e Part you need, fill it out, nur                                 | nber the entri                   | ies in the boxes on the left. A                                 | re Claims Secured by Property. If more space<br>ttach the Continuation Page to this page. On   |                   |                    |
| op of any<br>Part 1 | <b>.</b>              | ional pages, write your name a<br>ist All of Your PRIORITY Unsect |                                  | nber (if known).  |  |                   |                    |
|                     |                       | litors have priority unsecured                                    | claims again                     | net vou?  |  |                   |                    |
| _                   | -                     | to Part 2.  | ciaiiiis agaiii                  | ist you.  |  |                   |                    |
| □ Y                 |                       | to Fait 2.  |                                  |   |  |                   |                    |
|                     |                       | our priority unsecured claims.                                    | . If a creditor h                | nas more than one priority uns                                  | ecured claim, list the creditor separately for eac   | ch claim. For     |                    |
| each                | claim I               | isted, identify what type of clair                                | n it is. If a clai               | im has both priority and nonpri                                 | ority amounts, list that claim here and show bo  | th priority and   |                    |
|                     | -                     | •   |                                  | •   | ng to the creditor's name. If you have more thar<br>lds a particular claim, list the other creditors in F  | · ·               |                    |
|                     |                       | lanation of each type of claim, s                                 | _                                |   | •  |                   |                    |
|                     |                       |   |                                  |   | Total claim  | Priority amount   | Nonpriority amount |
| Dord O              |                       | ist All of Your NONPRIORITY Ur                                    | secured Clain                    | ms  |  | amount            | amount             |
| Part 2              |                       | litara hava mannularitus smaan                                    | unad alaima a                    | mainat vau2   |  |                   |                    |
| _                   | _                     | litors have nonpriority unsecu                                    |                                  |   | all an artist duty   |                   |                    |
| =                   |                       | u have nothing to report in this p                                | part. Submit t                   | this form to the court with your                                | other schedules.   |                   |                    |
|                     | es.                   | our nannriarity unacqured alai                                    | ima in the aln                   | shahatiaal ardar of the aradite                                 | or who holds each claim. If a creditor has more  | than and          |                    |
|                     | -                     | •   | -                                |   | listed, identify what type of claim it is. Do not lis  |                   |                    |
|                     |                       |   | •                                | icular claim, list the other credi                              | tors in Part 3.If you have more than three nonp  | riority unsecured |                    |
| claim               | is fill ou            | it the Continuation Page of Par                                   | t 2.                             |   |  |                   | Total claim        |
| 4.1 <u>B</u>        | K OF A                | AMER  | La                               | ast 4 digits of account number                                  | NULL   |                   | <b>\$</b> 1,361.00 |
|                     | reditor's N           |   | W                                | hen was the debt incurred?                                      | 1998-2014  |                   |                    |
| _                   | umber                 | Street  |                                  | non was the assemblance.  | <del></del>  |                   |                    |
|                     |                       |   | As                               | s of the date you file, the claim                               | is: Check all that apply.  |                   |                    |
| _                   | 'l Dooo               | TV 7000   | _                                | Contingent  |  |                   |                    |
| _                   | I Paso                | TX 79998<br>State Zip Co  |                                  | Unliquidated  |  |                   |                    |
| Who                 | owes                  | the debt? Check one.  | L                                | Disputed  |  |                   |                    |
| =                   | Debtor 1              | •   | -                                |   | d debe.  |                   |                    |
| =                   | Debtor 2<br>Debtor 1  | only<br>and Debtor 2 only   |                                  | pe of NONPRIORITY unsecure Student loans                        | d claim:   |                   |                    |
| =                   |                       | one of the debtors and another                                    | F                                | Obligations arising out of a separ                              | ration agreement or divorce  |                   |                    |
| =                   |                       | f this claim relates to a   |                                  | that you did not report as priority                             |  |                   |                    |
|                     | commu                 | nity debt   |                                  | Debts to pension or profit-sharing                              | g plans, and other similar debts   |                   |                    |
|                     | <b>ne claim</b><br>No | subject to offest?  | _                                | Other Cardit Card o   | or Cradit Usa  |                   |                    |
| =                   | Yes                   |   |                                  | Other. Specify Credit Card of                                   | or Credit OSE  |                   |                    |

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Case Number (if known) Document Andrea Louise Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page

| After lis | sting any entries on this page, number them b     | peginning with 4.4, followed by 4.5, and so forth.   | Total Claim         |
|-----------|---|--|---------------------|
| 4.2       | Bonded Collectors of Wisconsin                    | Last 4 digits of account number  | \$ <u>744.70</u>    |
|           | Creditor's Name                                   | When we the debt in sum of 2   |                     |
|           | PO Box 83  Number Street                          | When was the debt incurred?  |                     |
|           | Number Street                                     |  |                     |
|           |   | As of the date you file, the claim is: Check all that apply.   |                     |
|           | Portage WI 53901                                  | Contingent   |                     |
|           | City State Zip Code                               | Unliquidated   |                     |
| W         | /ho owes the debt? Check one.                     | Disputed   |                     |
| _         | Debtor 1 only                                     |  |                     |
| Ļ         | Debtor 2 only                                     | Type of NONPRIORITY unsecured claim:   |                     |
| Ļ         | Debtor 1 and Debtor 2 only                        | Student loans  |                     |
| L         | At least one of the debtors and another           | Obligations arising out of a separation agreement or divorce   |                     |
| L         | Check if this claim relates to a                  | that you did not report as priority claims   |                     |
| Is        | community debt<br>the claim subject to offest?    | Debts to pension or profit-sharing plans, and other similar debts  |                     |
| Ì         | No  | Other. Specify   |                     |
| Ī         | Yes   | Other. Specify   |                     |
| 4.3       | Capital One Bank                                  | Last 4 digits of account number  | \$ <u>10,291.36</u> |
|           | Creditor's Name                                   |  |                     |
|           | 1680 Capital One Dr                               | When was the debt incurred?  |                     |
|           | Number Street                                     |  |                     |
|           |   | As of the date you file, the claim is: Check all that apply.   |                     |
|           | Malaan  | Contingent   |                     |
|           | Mclean VA 22102 City State Zip Code               | Unliquidated   |                     |
| W         | City State Zip Code /ho owes the debt? Check one. | Disputed   |                     |
|           | Debtor 1 only                                     |  |                     |
| Ī         | Debtor 2 only                                     | Type of NONPRIORITY unsecured claim:   |                     |
| Ī         | Debtor 1 and Debtor 2 only                        | Student loans  |                     |
| Ī         | At least one of the debtors and another           | Obligations arising out of a separation agreement or divorce   |                     |
| Ī         | Check if this claim relates to a                  | that you did not report as priority claims   |                     |
| _         | community debt                                    | Debts to pension or profit-sharing plans, and other similar debts  |                     |
| ls        | the claim subject to offest?                      |  |                     |
| -         | ■ No<br>¬   | Other. Specify Credit Card or Credit Use   |                     |
| _         | Yes Cavalry Portfolio Services                    | Look & dimite of account mumbers   | <b>\$</b> 4,486.49  |
| 4.4       | Creditor's Name                                   | Last 4 digits of account number  | \$ <u>-4,400.40</u> |
|           | 500 Summit Lake Dr Ste 400                        | When was the debt incurred?  |                     |
|           | Number Street                                     |  |                     |
|           |   | As of the date you file, the claim is: Check all that apply.   |                     |
|           |   | Contingent   |                     |
|           | Valhalla NY 10595                                 | Unliquidated   |                     |
|           | City State Zip Code                               | Disputed   |                     |
| V         | /ho owes the debt? Check one.                     | Disputed   |                     |
|           | Debtor 1 only                                     | - (1015)   |                     |
| Ļ         | Debtor 2 only                                     | Type of NONPRIORITY unsecured claim:   |                     |
| Ļ         | Debtor 1 and Debtor 2 only                        | Student loans  Obligations arising out of a congration agreement or diverse                                |                     |
| L         | At least one of the debtors and another           | Obligations arising out of a separation agreement or divorce<br>that you did not report as priority claims |                     |
| L         | Check if this claim relates to a community debt   | Debts to pension or profit-sharing plans, and other similar debts  |                     |
| Is        | the claim subject to offest?                      | E Sector to periode of profit-origining plane, and other offillial debte                                   |                     |
|           | No  | Other. Specify Collecting for Creditor   |                     |
|           | Yes   |  |                     |

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Case Number (if known) Document Andrea Louise Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim** 15 Chase CARD \$ 887.00 Last 4 digits of account number

| 4.5      |   | Last 4 digits of account number                                   | <del></del>        |
|----------|---|---|--------------------|
|          | Creditor's Name                         | 2010 2011   |                    |
|          | Po Box 15298                            | When was the debt incurred? 2010-2014                             |                    |
|          | Number Street                           |   |                    |
|          | Names.                                  |   |                    |
|          |   | As of the date you file, the claim is: Check all that apply.      |                    |
|          |   | Contingent  |                    |
|          | Wilmington DE 19850                     |   |                    |
|          | City State Zip Code                     | Unliquidated  |                    |
|          | Who owes the debt? Check one.           | ☐ Disputed  |                    |
|          |   |   |                    |
|          | Debtor 1 only                           |   |                    |
|          | Debtor 2 only                           | Type of NONPRIORITY unsecured claim:                              |                    |
|          | Debtor 1 and Debtor 2 only              | Student loans   |                    |
|          |   |   |                    |
|          | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce      |                    |
|          | Check if this claim relates to a        | that you did not report as priority claims                        |                    |
|          | community debt                          | Debts to pension or profit-sharing plans, and other similar debts |                    |
|          | Is the claim subject to offest?         |   |                    |
|          |   | Over the Court on County Halos                                    |                    |
|          | No                                      | Other. Specify Credit Card or Credit Use                          |                    |
|          | Yes                                     |   |                    |
| 4.6      | Citibank                                | Last 4 digits of account number 1125                              | <b>\$</b> 1,486.00 |
|          | Creditor's Name                         |   |                    |
|          | Po Box 27288                            | When was the debt incurred? 2016-2016                             |                    |
|          |   |   |                    |
|          | Number Street                           |   |                    |
|          |   | As of the date you file, the claim is: Check all that apply.      |                    |
|          |   |   |                    |
|          | Tempe AZ 85285                          | Contingent  |                    |
|          |   | Unliquidated  |                    |
|          | City State Zip Code                     | Disputed  |                    |
|          | Who owes the debt? Check one.           |   |                    |
|          | Debtor 1 only                           |   |                    |
|          | Debtor 2 only                           | Type of NONPRIORITY unsecured claim:                              |                    |
|          |   |   |                    |
|          | Debtor 1 and Debtor 2 only              | Student loans   |                    |
|          | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce      |                    |
|          | Check if this claim relates to a        | that you did not report as priority claims                        |                    |
|          | community debt                          | Debts to pension or profit-sharing plans, and other similar debts |                    |
|          | Is the claim subject to offest?         | Debts to perison of profit-sharing plans, and other shinial debts |                    |
|          |   | _   |                    |
|          | No                                      | Other. Specify Collecting for Creditor                            |                    |
|          | Yes                                     |   |                    |
| 4.7      | Medicredit, INC                         | Last 4 digits of account number 4721                              | <b>\$</b> 495.00   |
| <u> </u> | Creditor's Name                         | <del></del>   |                    |
|          | Po Box 1629                             | When was the debt incurred? 2017-2017                             |                    |
|          |   |   |                    |
|          | Number Street                           |   |                    |
|          |   | As of the date you file, the claim is: Check all that apply.      |                    |
|          |   |   |                    |
|          | Manufaced Haisehta MO 02042             | Contingent  |                    |
|          | Maryland Heights MO 63043               | Unliquidated  |                    |
|          | City State Zip Code                     | Disputed  |                    |
|          | Who owes the debt? Check one.           | Disputed  |                    |
|          | Debtor 1 only                           |   |                    |
|          | Debtor 2 only                           | Type of NONPRIORITY unsecured claim:                              |                    |
|          |   |   |                    |
|          | Debtor 1 and Debtor 2 only              | Student loans   |                    |
|          | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce      |                    |
|          | Check if this claim relates to a        | that you did not report as priority claims                        |                    |
|          | _                                       |   |                    |
|          | community debt                          | Debts to pension or profit-sharing plans, and other similar debts |                    |
|          | Is the claim subject to offest?         |   |                    |
|          | No                                      | Other. Specify Medical Debt                                       |                    |
|          | Yes                                     |   |                    |
|          |   |   |                    |

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Case Number (if known) Document Andrea Louise Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim** 

| Creditor's Name   |   |                     |
|---|---|---------------------|
|   |   |                     |
| 950 Forrer Blvd   | When was the debt incurred? 2011-2016   |                     |
| Number Street   |   |                     |
| Number Street   |   |                     |
|   | As of the date you file, the claim is: Check all that apply.  |                     |
|   | Contingent  |                     |
| Kettering OH 45420  |   |                     |
| City State Zip Code   | Unliquidated  |                     |
| Who owes the debt? Check one.   | Disputed  |                     |
| _   |   |                     |
| Debtor 1 only   |   |                     |
| Debtor 2 only   | Type of NONPRIORITY unsecured claim:  |                     |
| Debtor 1 and Debtor 2 only  | Student loans   |                     |
| At least one of the debtors and another   | Obligations arising out of a separation agreement or divorce  |                     |
| <u> </u>  |   |                     |
| Check if this claim relates to a  | that you did not report as priority claims  |                     |
| community debt  | Debts to pension or profit-sharing plans, and other similar debts   |                     |
| Is the claim subject to offest?   |   |                     |
| No  | Other. Specify Credit Card or Credit Use  |                     |
| Yes   |   |                     |
| 4.9 Synchrony BANK  | Last 4 digits of account number7705   | <b>\$</b> _1,582.00 |
| Creditor's Name   |   | •                   |
| 2365 Northside Dr Ste 30  | When was the debt incurred? 2016-2016   |                     |
|   | When was the debt incurred:   |                     |
| Number Street   |   |                     |
|   | As of the date you file, the claim is: Check all that apply.  |                     |
|   |   |                     |
| San Diego CA 92108  | Contingent  |                     |
|   | Unliquidated  |                     |
| City State Zip Code Who owes the debt? Check one.   | Disputed  |                     |
| _   |   |                     |
| Debtor 1 only   |   |                     |
| Debtor 2 only   | Type of NONPRIORITY unsecured claim:  |                     |
|   |   |                     |
| <b> </b>  | Student loans   |                     |
| Debtor 1 and Debtor 2 only  |   |                     |
| Debtor 1 and Debtor 2 only  At least one of the debtors and another   | Obligations arising out of a separation agreement or divorce  |                     |
| Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a   | Obligations arising out of a separation agreement or divorce that you did not report as priority claims   |                     |
| Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt  | Obligations arising out of a separation agreement or divorce  |                     |
| Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a   | Obligations arising out of a separation agreement or divorce that you did not report as priority claims   |                     |
| Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt  | Obligations arising out of a separation agreement or divorce that you did not report as priority claims   |                     |
| Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt Is the claim subject to offest?  | Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  |                     |
| Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt  Is the claim subject to offest?  No  Yes  | Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Unknown Credit Extension   | <b>\$</b> 0.00      |
| Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt Is the claim subject to offest?  No  Yes  4.10  Worlds Foremost BANK   | Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. SpecifyUnknown Credit Extension   | \$ <u>0.00</u>      |
| Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt Is the claim subject to offest?  No  Yes  4.10  Worlds Foremost BANK  Creditor's Name  | Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Unknown Credit Extension  Last 4 digits of account number NULL  | \$ <u>0.00</u>      |
| Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt  Is the claim subject to offest?  No  Yes  4.10  Worlds Foremost BANK  Creditor's Name 4800 Nw 1St St Ste 300  | Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify  | \$ <u>0.00</u>      |
| Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt Is the claim subject to offest?  No  Yes  4.10  Worlds Foremost BANK  Creditor's Name  | Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Unknown Credit Extension  Last 4 digits of account number NULL  | \$ <u>0.00</u>      |
| Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt  Is the claim subject to offest?  No  Yes  4.10  Worlds Foremost BANK  Creditor's Name 4800 Nw 1St St Ste 300  | Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Unknown Credit Extension  Last 4 digits of account number NULL When was the debt incurred?  2010-2015   | <b>\$</b> 0.00      |
| Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt  Is the claim subject to offest?  No  Yes  4.10  Worlds Foremost BANK  Creditor's Name 4800 Nw 1St St Ste 300  | Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Unknown Credit Extension  Last 4 digits of account number NULL When was the debt incurred? 2010-2015  As of the date you file, the claim is: Check all that apply.  | <b>\$</b> _0.00     |
| Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt  Is the claim subject to offest?  No  Yes  4.10  Worlds Foremost BANK  Creditor's Name 4800 Nw 1St St Ste 300  Number Street   | Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Unknown Credit Extension  Last 4 digits of account number NULL When was the debt incurred? 2010-2015  As of the date you file, the claim is: Check all that apply. Contingent   | \$ <u>0.00</u>      |
| Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt  Is the claim subject to offest?  No  Yes  4.10  Worlds Foremost BANK  Creditor's Name 4800 Nw 1St St Ste 300  Number Street  Lincoln NE 68521   | Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Unknown Credit Extension  Last 4 digits of account number NULL When was the debt incurred? 2010-2015  As of the date you file, the claim is: Check all that apply.  | \$ <u>0.00</u>      |
| Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt  Is the claim subject to offest?  No  Yes  4.10  Worlds Foremost BANK  Creditor's Name 4800 Nw 1St St Ste 300  Number Street  Lincoln NE 68521  City State Zip Code  | Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Unknown Credit Extension  Last 4 digits of account number NULL When was the debt incurred? 2010-2015  As of the date you file, the claim is: Check all that apply. Contingent   | \$ <u>0.00</u>      |
| Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt  Is the claim subject to offest?  No  Yes  4.10  Worlds Foremost BANK  Creditor's Name 4800 Nw 1St St Ste 300  Number Street  Lincoln NE 68521  City State Zip Code  Who owes the debt? Check one.   | Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Unknown Credit Extension  Last 4 digits of account number NULL When was the debt incurred? 2010-2015  As of the date you file, the claim is: Check all that apply. Contingent Unliquidated  | \$ <u>0.00</u>      |
| Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt  Is the claim subject to offest?  No  Yes  4.10  Worlds Foremost BANK  Creditor's Name 4800 Nw 1St St Ste 300  Number Street  Lincoln NE 68521  City State Zip Code  Who owes the debt? Check one.  Debtor 1 only  | Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Unknown Credit Extension  Last 4 digits of account number NULL When was the debt incurred? 2010-2015  As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed   | \$ <u>0.00</u>      |
| Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt  Is the claim subject to offest?  No  Yes  4.10  Worlds Foremost BANK  Creditor's Name 4800 Nw 1St St Ste 300  Number Street  Lincoln NE 68521  City State Zip Code  Who owes the debt? Check one.   | Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Unknown Credit Extension  Last 4 digits of account number NULL When was the debt incurred? 2010-2015  As of the date you file, the claim is: Check all that apply. Contingent Unliquidated  | \$ <u>0.00</u>      |
| Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt  Is the claim subject to offest?  No  Yes  4.10  Worlds Foremost BANK  Creditor's Name 4800 Nw 1St St Ste 300  Number Street  Lincoln NE 68521  City State Zip Code  Who owes the debt? Check one.  Debtor 1 only  | Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Unknown Credit Extension  Last 4 digits of account number NULL When was the debt incurred? 2010-2015  As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed   | \$ <u>0.00</u>      |
| Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt Is the claim subject to offest?  No  Yes  4.10  Worlds Foremost BANK  Creditor's Name 4800 Nw 1St St Ste 300  Number Street  Lincoln NE 68521  City State Zip Code  Who owes the debt? Check one.  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  | Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Unknown Credit Extension  Last 4 digits of account number NULL When was the debt incurred? 2010-2015  As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed  Type of NONPRIORITY unsecured claim: □ Student loans  | \$ <u>0.00</u>      |
| Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt  Is the claim subject to offest?  No  Yes  4.10  Worlds Foremost BANK  Creditor's Name 4800 Nw 1St St Ste 300  Number Street  Lincoln NE 68521  City State Zip Code  Who owes the debt? Check one.  Debtor 1 only  Debtor 2 only  At least one of the debtors and another  | Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Unknown Credit Extension  Last 4 digits of account number NULL When was the debt incurred? 2010-2015  As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce  | \$ <u>0.00</u>      |
| Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt  Is the claim subject to offest?  No  Yes  4.10  Worlds Foremost BANK  Creditor's Name 4800 Nw 1St St Ste 300  Number Street  Lincoln NE 68521  City State Zip Code  Who owes the debt? Check one.  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a  | Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Unknown Credit Extension  Last 4 digits of account number NULL When was the debt incurred?  As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims   | \$ <u>0.00</u>      |
| Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt  Is the claim subject to offest?  No  Yes  4.10  Worlds Foremost BANK  Creditor's Name 4800 Nw 1St St Ste 300  Number Street  Lincoln NE 68521  City State Zip Code  Who owes the debt? Check one.  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt                             | Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Unknown Credit Extension  Last 4 digits of account number NULL When was the debt incurred? 2010-2015  As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce  | \$_0.00             |
| Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt  Is the claim subject to offest?  No Yes  4.10  Worlds Foremost BANK  Creditor's Name 4800 Nw 1St St Ste 300  Number Street  Lincoln NE 68521  City State Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this claim relates to a community debt Is the claim subject to offest? | Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Unknown Credit Extension  Last 4 digits of account number NULL When was the debt incurred? 2010-2015  As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | \$ <u>0.00</u>      |
| Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt  Is the claim subject to offest?  No  Yes  4.10  Worlds Foremost BANK  Creditor's Name 4800 Nw 1St St Ste 300  Number Street  Lincoln NE 68521  City State Zip Code  Who owes the debt? Check one.  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt                             | Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Unknown Credit Extension  Last 4 digits of account number NULL When was the debt incurred?  As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims   | \$ <u>0.00</u>      |

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Case Number (if known)

Debtor 1 Andrea

Louise

List Others to Be Notified for a Debt That You Already Listed

Document

| 5. | Use this page only if you have others to be notified about you example, if a collection agency is trying to collect from you 2, then list the collection agency here. Similarly, if you have additional creditors here. If you do not have additional personal creditors here. | for a debt you<br>more than on | owe to someone else, list the original e creditor for any of the debts that you | creditor in Parts 1 or<br>listed in Parts 1 or 2, list the   |
|----|--|--------------------------------|---|--|
|    | Clerk, Fifth Mun. Div.   |                                | On which entry in Part 1 or Part 2 lis  | st the original creditor?  |
|    | Name<br>10220 S. 76th Ave., #121   | •                              | Line 3 of (Check one):  | Part 1: Creditors with Priority Unsecured Claims   |
|    | Number Street  |                                |   | Part 2: Creditors with Nonpriority Unsecured Claims  |
|    |  | 60455                          | Last 4 digits of account number   |  |
|    | City State Zip C  Blitt and Gaines, PC   | oue                            | On which entry in Part 1 or Part 2 lis  | st the original creditor?  |
|    | Name   | •                              | Line 3 of (Check one):  | Part 1: Creditors with Priority Unsecured Claims   |
|    | 661 Glenn Ave.  Number Street  |                                | Line or (oneck one).  | Part 2: Creditors with Nonpriority Unsecured Claims  |
|    | Wheeling IL City State Zip 0   | 60090                          | Last 4 digits of account number   |  |
|    | Clerk, Fifth Mun. Div., 17 M5 001975   | Joue                           | On which codes to Boot 4 on Boot 9 to   | Albertain and the Control of the Con |
|    | Name   |                                | On which entry in Part 1 or Part 2 lis  |  |
|    | 10220 S. 76th Ave., #121   |                                | Line 4 of (Check one):  | Part 1: Creditors with Priority Unsecured Claims   |
|    | Number Street  |                                |   | Part 2: Creditors with Nonpriority Unsecured Claims  |
|    | Bridgeview IL City State Zip C   | 60455<br>ode                   | Last 4 digits of account number   |  |
|    | Blitt and Gaines, PC, 17 M5 001975   |                                | On which entry in Part 1 or Part 2 lis  | st the original creditor?  |
|    | Name<br>661 Glenn Ave.   |                                | Line 4 of (Check one):  | Part 1: Creditors with Priority Unsecured Claims   |
|    | Number Street  | •                              |   | Part 2: Creditors with Nonpriority Unsecured Claims  |
|    | Wheeling IL  | 60090                          | Last 4 digits of account number   |  |
|    | City State Zip 0   | Code                           |   |  |
|    | Clerk, Fifth Mun. Div., Bankruptcy Dept.   |                                | On which entry in Part 1 or Part 2 lis  | st the original creditor?  |
|    | Name<br>10220 S. 76th Ave., #121   |                                | Line 6 of (Check one):  | Part 1: Creditors with Priority Unsecured Claims   |
|    | Number Street  |                                |   | Part 2: Creditors with Nonpriority Unsecured Claims  |
|    | Bridgeview IL  | 60455                          | Last 4 digits of account number   | 1125   |
|    | City State Zip C   |                                | Last 4 digits of account number   |  |
|    | Blitt and Gaines, PC, Bankruptcy Dept.   |                                | On which entry in Part 1 or Part 2 lis  | st the original creditor?  |
|    | Name<br>661 Glenn Ave.   |                                | Line 6 of (Check one):  | Part 1: Creditors with Priority Unsecured Claims   |
|    | Number Street  |                                | ·   | Part 2: Creditors with Nonpriority Unsecured Claims  |
|    |  |                                |   | 4405   |
|    |  | 60090<br>Code                  | Last 4 digits of account number   | 1125   |

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Andrea Louise Debtor 1

|                          | nounts of certain types of unsecured claims. This information is a counts for each type of unsecured claim. | for statistical re | eporting purposes | only. 28 U.S.C. § |
|--------------------------|---|--------------------|-------------------|-------------------|
|                          |   |                    | Total claim       |                   |
| otal claims<br>om Part 1 | 6a. Domestic support obligations  | 6a.                | \$                | 0.00              |
|                          | 6b. Taxes and Certain other debts you owe the government  | 6b.                | \$                | 0.00              |
|                          | 6c. Claims for death or personal injury while you were intoxicated  | 6c.                | \$                | 0.00              |
|                          | 6d. <b>Other.</b> Add all other priority unsecured claims. Write that amount here.                          | 6d.                | \$                | 0.00              |
|                          | 6e. <b>Total.</b> Add lines 6a through 6d.  | 6e.                | \$                | 0.00              |
|                          |   |                    | Total claim       |                   |
| otal claims              | 6f. Student loans   | 6f.                | \$                | 0.00              |
|                          | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g.                | \$                | 0.00              |
|                          | 6h. Debts to pension or profit-sharing plans, and other similar debts                                       | 6h.                | \$                | 0.00              |
|                          | Other. Add all other nonpriority unsecured claims.     Write that amount here.                              | 6i.                | \$                | 21,333.55         |

6j. Total. Add lines 6f through 6i.

21,333.55

|        |                                   | Caso 17              | 26945 Doc 1 I   | ilad 00/07/17   | Entor                           | ed 09/07/17 :          | 16:30:05                            | Desc Main                   |       |
|--------|-----------------------------------|----------------------|---|---|---------------------------------|------------------------|-------------------------------------|-----------------------------|-------|
| Fi     | ll in this in                     | formation to ident   |   |   |                                 | 5 of 54                |                                     |                             |       |
| D      | ebtor 1                           | Andrea               | Louise  | Viverito  | -                               |                        |                                     |                             |       |
| D      | ebtor 2                           | First Name           | Middle Name   | Last Name   |                                 |                        |                                     |                             |       |
|        | pouse, if filing)                 | First Name           | Middle Name   | Last Name   | -                               |                        |                                     |                             |       |
| U      | nited States                      | Bankruptcy Court for | the : <u>NORTHERN</u> District of _                               |   |                                 |                        |                                     |                             |       |
|        | ase Number<br>f known)            |                      |   | (State)   |                                 |                        |                                     | Check if this amended filir |       |
| Off    | icial F                           | orm 106G             |   |   |                                 |                        |                                     |                             |       |
| Scł    | nedule                            | G: Executo           | ory Contracts and   | Unexpired Lea   | ases                            |                        |                                     |                             | 12/15 |
| 3e as  | complete mation. If n             | and accurate as p    | possible. If two married people<br>ded, copy the additional page  | e are filing together, bot<br>fill it out, number the e | th are equall<br>entries, and a | y responsible for sup  | oplying correct<br>On the top of ar | ny                          |       |
| additi | ional page                        | s, write your name   | e and case number (if known).                                     |   |                                 |                        |                                     |                             |       |
| 1. L   | _                                 | -                    | contracts or unexpired leases?  ubmit this form to the court with |   | ∕ou have not                    | ning else to report on | this form                           |                             |       |
|        | _                                 |                      | nation below even if the contrac                                  |   |                                 |                        |                                     |                             |       |
| _      | 100.11                            |                      | iddon bolow over it allo contrac                                  |   | 00//044/07                      | 2. Troporty (Omolar I  | 01111 1007 1127                     |                             |       |
|        |                                   |                      | or company with whom you ha                                       |   |                                 |                        |                                     |                             |       |
|        | <b>xample, re</b><br>inexpired le |                      | cell phone). See the instruction                                  | is for this form in the inst                            | truction book                   | let for more examples  | s of executory cor                  | ntracts and                 |       |
|        | Person or                         | company with wh      | nom you have the contract or I                                    | ease  |                                 | State what the         | contract or lease                   | e is for                    |       |
| 2.1    | l                                 |                      |   |   |                                 |                        |                                     |                             |       |
| 2.1    | Name                              |                      |   |   | _                               |                        |                                     |                             |       |
|        |                                   |                      |   |   | _                               |                        |                                     |                             |       |
|        | Number                            | Street               |   |   |                                 |                        |                                     |                             |       |
|        | City                              |                      | State Zip   | Code  | _                               |                        |                                     |                             |       |
| 2.2    |                                   |                      |   |   |                                 |                        |                                     |                             |       |
|        | Name                              |                      |   |   | _                               |                        |                                     |                             |       |
|        | Number                            | Street               |   |   |                                 |                        |                                     |                             |       |
|        |                                   |                      |   |   | _                               |                        |                                     |                             |       |
|        | City                              |                      | State Zip   | Code  |                                 |                        |                                     |                             |       |
| 2.3    |                                   |                      |   |   | _                               |                        |                                     |                             |       |
|        | Name                              |                      |   |   | _                               |                        |                                     |                             |       |
|        | Number                            | Street               |   |   |                                 |                        |                                     |                             |       |
|        | City                              |                      | State Zip   | Code  | _                               |                        |                                     |                             |       |
|        | 1                                 |                      |   |   |                                 |                        |                                     |                             |       |
| 2.4    |                                   |                      |   |   | _                               |                        |                                     |                             |       |
|        | Name                              |                      |   |   | _                               |                        |                                     |                             |       |
|        | Number                            | Street               |   |   |                                 |                        |                                     |                             |       |
|        | City                              |                      | State Zip   | Code  | _                               |                        |                                     |                             |       |
| 2.5    |                                   |                      |   |   |                                 |                        |                                     |                             |       |
| 0      | Name                              |                      |   |   | _                               |                        |                                     |                             |       |
|        |                                   |                      |   |   | _                               |                        |                                     |                             |       |
|        | Number                            | Street               |   |   |                                 |                        |                                     |                             |       |

City

Official Form 106G

State Zip Code

| Fill in this in     | formation to iden    | tify your case:                    |                 |
|---------------------|----------------------|------------------------------------|-----------------|
| Debtor 1            | Andrea               | Louise                             | Viverito        |
|                     | First Name           | Middle Name                        | Last Name       |
| Debtor 2            | -                    |                                    |                 |
| (Spouse, if filing) | First Name           | Middle Name                        | Last Name       |
| United States       | Bankruptcy Court for | the: <u>NORTHERN</u> District of _ | ILLINOIS(State) |
| Case Number         |                      |                                    |                 |
| (If known)          |                      |                                    |                 |

# Official Form 106H

Schedule H: Your Codebtors 12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

| any A       | dditional Pages, wr | te your name and case numbe  | r (if known). Answer every     | question.           |  |
|-------------|---------------------|--|--------------------------------|---------------------|--|
| 1. <b>D</b> | o you have any coo  | ebtors? (If you are filing a joint                                       | case, do not list either spous | se as a codebtor.)  |  |
|             | No.                 |  |                                |                     |  |
|             | Yes                 |  |                                |                     |  |
|             | =                   | s, have you lived in a commur<br>aho, Lousiiana, Nevada, New M           |                                |                     | roperty states and territories include<br>Visconsin.)                            |
|             | No. Go to line 3.   |  |                                |                     |  |
|             | Yes. Did your sp    | ouse, former spouse, or legal ed   | uivalent live with you at the  | time?               |  |
|             | _                   | n community state or territory die                                       | d you live?                    | Fill in the n       | ame and current address of that person.  |
|             | Name of your spo    | use, former spouse or legal equivalent                                   |                                |                     |  |
|             | Number St           | reet   |                                |                     |  |
|             | City                |  | State                          | Zip Code            |  |
| 3 In        | -                   | f vour codebtors. Do not inclu   |                                | •                   | is filing with you. List the person  |
|             |                     | Form 106D), Schedule E/F (Off<br>edule G to fill out Column 2.<br>debtor | icial Form 106E/F), or Sche    | dule G (Official Fo | Column 2: The creditor to whom you owe the debt  Check all schedules that apply: |
| 3.1         |                     |  |                                |                     | Schedule D, line   |
|             | Name                |  |                                | _                   | Schedule E/F, line   |
|             | Number Stre         | et   |                                |                     | Schedule G, line   |
|             | City                | S  | tate Z                         | Zip Code            |  |
| 3.2         |                     |  |                                | _                   | Schedule D, line   |
|             | Name                |  |                                | _                   | Schedule E/F, line   |
|             | Number Stre         | et   |                                | _                   | Schedule G, line   |
|             | City                | S  | tate Z                         | Zip Code            | _  |
| 3.3         |                     |  |                                | _                   | Schedule D, line   |
|             | Name                |  |                                | _                   | Schedule E/F, line   |
|             | Number Stre         | et   |                                |                     | Schedule G, line   |
|             | City                | S  | tate Z                         | Zip Code            |  |

Official Form 106H Record # 751406 Schedule H: Your Codebtors Page 1 of 1

|                     |                      |                                  | DUGUIII             | <u>Paue 71</u> 01 34 |                           |
|---------------------|----------------------|----------------------------------|---------------------|----------------------|---------------------------|
| Fill in this ir     | nformation to ident  | ify your case:                   |                     |                      |                           |
| Debtor 1            | Andrea First Name    | Louise  Middle Name              | Viverito  Last Name | _                    |                           |
| Debtor 2            |                      |                                  |                     | _                    |                           |
| (Spouse, if filing) | First Name           | Middle Name                      | Last Name           |                      |                           |
| Case Numbe          | Bankruptcy Court for | the : <u>NORTHERN DISTRICT C</u> | F ILLINOIS          | Check if this is:    |                           |
| (If known)          |                      |                                  |                     | An amended           | •                         |
|                     |                      |                                  |                     | <b>—</b> ···         | nt showing post-petition  |
|                     |                      |                                  |                     | chapter 13 i         | ncome as of the following |
| fficial F           | orm 106I             |                                  |                     | <br>MM / DD / Y      |                           |
|                     |                      |                                  |                     | ו / טט / ואוואו      | 111                       |

### **Schedule I: Your Income**

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | ort 1: Describe Employment  |   |                            |              |                                   |      |
|----|---|---|----------------------------|--------------|-----------------------------------|------|
| 1. | Fill in your employment information   |   | Debtor 1                   |              | Debtor 2 or non-filing spo        | ouse |
|    | If you have more than one job, attach a separate page with information about additional employers.  | Employment status   | X Employed Not employed    | 1            | Employed  Not employed            |      |
|    | Include part-time, seasonal, or self-employed work.   | Occupation  | Home Healthcare            |              |                                   |      |
|    | Occupation may Include student or homemaker, if it applies.   | Employers name  | Self Employed              |              |                                   |      |
|    |   | Employers address   | 29 Cour Montreal           | _            |                                   |      |
|    |   |   | Palos Hills, IL 604        | 165          | ,                                 |      |
|    |   |   |                            |              |                                   |      |
|    |   | How long employed there?  | Since 3/1/2017             |              |                                   |      |
| Pa | Ift 2: Give Details About Monthl  | ly Income   |                            |              |                                   |      |
|    | Estimate monthly income as of the spouse unless you are separated. If you or your non-filing spouse has lines below. If you need more space | ve more than one employer, comb                                       | oine the information for a |              | . , ,                             |      |
|    |   |   |                            | For Debtor 1 | For Debtor 2 or non-filing spouse |      |
| 2. |   | y and commissions (before all pa<br>calculate what the monthly wage w | •                          | \$1,516.67   | \$0.00                            |      |
| 3. | Estimate and list monthly overti  | me pay.   |                            | \$0.00       | \$0.00                            |      |
| 4. | Calculate gross income. Add line  | e 2 + line 3.   |                            | \$1,516.67   | \$0.00                            |      |

 Official Form 106I
 Record # 751406
 Schedule I: Your Income
 Page 1 of 2

Document Andrea Louise Debtor 1 Case Number (if known) First Name Middle Name

|   | First Name  | Middle Name  | Last Name   |  |                       |                |                                    |
|---|---|--|---|--|-----------------------|----------------|------------------------------------|
|   |   |  |   |  | For Debtor 1          |                | or Debtor 2 or<br>on-filing spouse |
| Cop   | y line 4 here   |  |   | 4.   | \$1,516.67            |                | \$0.00                             |
| 5. List al  | I payroll deductions:   |  |   |  |                       |                |                                    |
| 5a.   | Tax, Medicare, and S  | ocial Security deductions  |   | 5a.  | \$227.50              |                | \$0.00                             |
| 5b.   | Mandatory contributi  | ions for retirement plans  |   | 5b.  | \$0.00                |                | \$0.00                             |
| 5c.   | Voluntary contribution  | ons for retirement plans   |   | 5c.  | \$0.00                |                | \$0.00                             |
| 5d.   | Required repayments   | s of retirement fund loans   |   | 5d.  | \$0.00                |                | \$0.00                             |
| 5e.   | Insurance   |  |   | 5e.  | \$0.00                |                | \$0.00                             |
| 5f.   | Domestic support ob   | oligations   |   | 5f.  | \$0.00                |                | \$0.00                             |
| 5g.   | Union dues  |  |   | 5g.  | \$0.00                |                | \$0.00                             |
| 5h.   | Other deductions. Sp  | pecify:  |   | 5h.  | \$0.00                |                | \$0.00                             |
| 6. Add th   | e payroll deductions  | . Add lines 5a + 5b + 5c + 5d + 5e   | e +5f + 5g +5h.                                   | 6.   | \$227.50              |                | \$0.00                             |
| 7. Calcul   | ate total monthly take  | e-home pay. Subtract line 6 from   | line 4.   | 7.   | \$1,289.17            |                | \$0.00                             |
| 8. List all   | other income regula   | rly received:  |   |  |                       |                |                                    |
| 8a.   | Net income from re  | ental property and from operatin   | ıg a business,                                    |  |                       |                |                                    |
|   | profession, or farm   | ı  |   |  |                       |                |                                    |
|   |   | for each property and business s<br>nd necessary business expenses   | 0.0   |  |                       |                |                                    |
|   | monthly net income  |  |   | 8a.  | \$400.00              |                | \$0.00                             |
| 8b.   | Interest and divide   | nds  |   | 8b.  | \$0.00                |                | \$0.00                             |
| 8c.   | Family support pay dependent regularl   | rments that you, a non-filing spo<br>y receive   | ouse, or a  | 8c.  | \$ 100.00             |                | \$ 0.00                            |
|   | Include alimony, spo  | ousal support, child support, mair   | ntenance, divorce                                 |  |                       |                |                                    |
|   | settlement, and prop  | perty settlement.  |   |  |                       |                |                                    |
| 8d.   | Unemployment cor  | mpensation   |   | 8d.  | \$0.00                |                | \$0.00                             |
| 8e.   | Social Security   |  |   | 8e.  | \$0.00                |                | \$0.00                             |
| 8f.   | Other government  | assistance that you regularly re   | ceive   | 8f.  | \$0.00                |                | \$0.00                             |
|   | Include cash assista  | ance and the value (if known) of a   | any non-cash                                      |  |                       |                |                                    |
|   | Supplemental Nutrit   | receive, such as food stamps (be<br>tion Assistance Program) or hous   | sing subsidies.                                   |  |                       |                |                                    |
| 8g.   | Pension or retireme   | ent income   |   | 8g.  | \$1,271.00            |                | \$0.00                             |
| 8h.   | Other monthly inco  | ome. Specify:  |   | 8h.  | \$0.00                |                | \$0.00                             |
| 9. Add  | l all other income. Ac  | dd lines 8a + 8b + 8c + 8d + 8e +  | 8f +8g + 8h.                                      | 9.   | \$1,771.00            |                | \$0.00                             |
|   | -   | ne. Add line 7 + line 9.<br>for Debtor 1 and Debtor 2 or non   | -filing spouse.                                   | 10.  | \$3,060.17            | +              | \$0.00                             |
| Inclination of the Double Special Notice 12. Adda Write | ude contributions from er friends or relatives. not include any amount ecify:  If the amount in the late that amount on the | entributions to the expenses that an unmarried partner, members onts already included in lines 2-10 set column of line 10 to the amount of Summary of Schedules and States or decrease within the year a | or amounts that are no<br>unt in line 11. The res | our dependent ot available to ult is the com | p pay expenses listed | in <i>Sche</i> |                                    |

| Fill in this in                 | formation to identify yo   | our case:                  |                              |   |  |                               |
|---------------------------------|----------------------------|----------------------------|------------------------------|---|--|-------------------------------|
| Debtor 1                        | Andrea                     | Louise                     | Viverito                     | Check if this is:   |  |                               |
|                                 | First Name                 | Middle Name                | Last Name                    | An amende   | ŭ                                      |                               |
| Debtor 2<br>(Spouse, if filing) | First Name                 | Middle Name                | Last Name                    |   | ent showing post<br>of the following d | -petition chapter 13<br>ate:  |
| United States                   | Bankruptcy Court for the : | NORTHERN DISTRICT C        | OF ILLINOIS                  |   |  | ato.                          |
| Case Number<br>(If known)       | r                          |                            | _                            | MM / DD / \   | YYYY                                   |                               |
| ∟<br>Official F                 | orm 106J                   |                            |                              |   | -                                      | 2 because Debtor 2            |
|                                 |                            |                            |                              | mamams a  | separate house                         |                               |
|                                 | e J: Your Ex               |                            | lo are filing together, both | are equally responsible for supplying   | ng correct informs                     | 12/14                         |
| -                               | -                          |                            |                              | ages, write your name and case num  | -                                      |                               |
| Part 1:                         | Describe Your Household    |                            |                              |   |  |                               |
| 1. Is this a joi                | int case?                  |                            |                              |   |  |                               |
|                                 | Go to line 2.              |                            |                              |   |  |                               |
| Yes.                            | Does Debtor 2 live in a    | separate household?        |                              |   |  |                               |
|                                 |                            | st file a separate Schedul | le J.                        |   |  |                               |
|                                 |                            |                            |                              |   |  |                               |
| 2. Do you l                     | have dependents?           | ☐ No                       |                              | Dependent's relationship to<br>Debtor 1 or Debtor 2                           | Dependent's age                        | Does dependent live with you? |
| Do not lis<br>Debtor 2          | st Debtor 1 and            |                            | this information for dent    | 2000. 1 31 2000. 2  |  | No                            |
| Do not s                        | tate the dependents'       |                            |                              | Son   | 18                                     | X Yes                         |
| names.                          | tate the appendents        |                            |                              |   |  | x No                          |
|                                 |                            |                            |                              |   |  | Yes                           |
|                                 |                            |                            |                              |   |  | X No                          |
|                                 |                            |                            |                              |   |  | Yes                           |
|                                 |                            |                            |                              |   |  | X No                          |
|                                 |                            |                            |                              |   |  | Yes                           |
|                                 |                            |                            |                              |   |  |                               |
| 3. Do your                      | expenses include           |                            |                              |   |  | Yes                           |
| expense                         | s of people other than     | X No                       |                              |   |  |                               |
| -                               | and your dependents?       |                            |                              |   |  |                               |
|                                 | Estimate Your Ongoing M    |                            | lana wawa waina thia faw     | m oo o ouwylamant in a Chantar 42 a   |  |                               |
| -                               |                            |                            |                              | m as a supplement in a Chapter 13 o<br>, check the box at the top of the forr | -                                      |                               |
| the applicable                  |                            | ach govornment acciets     | nce if you know the value    |   |  |                               |
|                                 | •                          | _                          | Income (Official Form 106    |   | Y                                      | our expenses                  |
| 4. The rent                     | tal or home ownership o    | expenses for your resid    | ence. Include first mortgag  | ge payments and   |  |                               |
| any rent                        | for the ground or lot.     |                            |                              |   | 4.                                     | \$1,230.00                    |
| If not in                       | cluded in line 4:          |                            |                              |   |  |                               |
| 4a. Re                          | eal estate taxes           |                            |                              |   | 4a.                                    | \$0.00                        |
|                                 | operty, homeowner's, or    |                            |                              |   | 4b.                                    | \$0.00                        |
|                                 | ome maintenance, repair    |                            |                              |   | 4c.                                    | \$0.00                        |
| 4d. Ho                          | meowner's association of   | or condominium dues        |                              |   | 4d.                                    | \$162.00                      |

Andrea Louise Debtor 1

Document

Page 30 of 54 Case Number (if known) \_

| ebtor 1 |   | Viverilo                                      | Case Number (if known) |              |          |
|---------|---|---|------------------------|--------------|----------|
|         | First Name Middle Name  | Last Name                                     |                        |              |          |
|         |   |   |                        | Your expense | <b>S</b> |
| 5.      | Additional Mortgage payments for your reside                                  | ence, such as home equity loans               | 5.                     |              | \$0.00   |
|         | Utilities:  |   | 6a.                    |              | \$240.00 |
|         | 6a. Electricity, heat, natural gas  |   | 6b.                    |              | \$80.00  |
|         | 6b. Water, sewer, garbage collection  | and and a new inc                             | 6c.                    |              | \$160.00 |
|         | Sc. Telephone, cell phone, internet, satellite, a                             |   | 6d.                    | \$           | 0.00     |
|         | 6d. Other. Specify:   |   |                        | Ψ            | \$500.00 |
|         | Food and housekeeping supplies  |   | 7.                     |              | \$0.00   |
|         | Childcare and children's education costs                                      |   | 8.                     |              | \$80.00  |
|         | Clothing, laundry, and dry cleaning   |   | 9.                     |              | \$70.00  |
|         | Personal care products and services   |   | 10.                    |              | \$60.00  |
|         | Medical and dental expenses   |   | 11.                    |              | \$288.00 |
|         | Transportation. Include gas, maintenance, bus<br>Do not include car payments. | or train fare.                                | 12.                    |              | Ψ200.00  |
| 13.     | Entertainment, clubs, recreation, newspapers                                  | , magazines, and books                        | 13.                    |              | \$65.00  |
| 14.     | Charitable contributions and religious donation                               | ons   | 14.                    |              | \$0.00   |
| 15.     | Insurance.  |   |                        |              |          |
|         | Do not include insurance deducted from your pa                                | ay or included in lines 4 or 20.              |                        |              |          |
|         | 15a. Life insurance   |   | <b>15a</b> .           |              | \$0.00   |
|         | 15b. Health insurance   |   | 15b.                   |              | \$0.00   |
|         | 15c. Vehicle insurance  |   | 15c.                   |              | \$120.00 |
|         | 15d. Other insurance. Specify:  |   | 15d.                   |              | \$0.00   |
| 16.     | Taxes. Do not include taxes deducted from you                                 | pay or included in lines 4 or 20.             |                        |              |          |
| :       | Specify:  |   | 16.                    |              | \$0.00   |
| 17.     | Installment or lease payments:  |   |                        |              |          |
|         | 17a. Car payments for Vehicle 1   |   | 17a.                   |              | \$0.00   |
|         | 17b. Car payments for Vehicle 2   |   | 17b.                   |              | \$0.00   |
|         | 17c. Other. Specify:  |   | 17c.                   |              | \$0.00   |
|         | 17d. Other. Specify:  |   | 17d.                   |              | \$0.00   |
| 18.     | Your payments of alimony, maintenance, and                                    | support that you did not report as deducte    | d                      |              |          |
| 1       | from your pay on line 5, Schedule I, Your Inco                                | ome (Official Form 106I).                     | 18.                    |              | \$0.00   |
| 19.     | Other payments you make to support others v                                   | vho do not live with you.                     |                        |              |          |
|         | Specify:  |   | 19.                    |              | \$0.00   |
| 20.     | Other real property expenses not included in                                  | lines 4 or 5 of this form or on Schedule I: ) | our Income.            |              |          |
| :       | 20a. Mortgages on other property  |   | 20a.                   |              | \$ 0.00  |
| :       | 20b. Real estate taxes  |   | 20b.                   | \$           | 0.00     |
| :       | 20c. Property, homeowner's, or renter's insuran                               | ce  | 20c.                   | \$           | 0.00     |
| :       | 20d. Maintenance, repair, and upkeep expense:                                 | S   | 20d.                   | \$           | 0.00     |
|         | 20e. Homeowner's association or condominium                                   | dues  | 20e.                   | \$           | 0.00     |

Official Form 106J Record # 751406 Case 17-26845 Doc 1 Filed 09/07/17 Entered 09/07/17 16:30:05 Desc Main Document Page 31 of 54

| Debtor | 1 Andre   | a         | Louise                              | Viverito                          | Case Number (if known) |               |            |
|--------|-----------|-----------|-------------------------------------|-----------------------------------|------------------------|---------------|------------|
|        | First Nar | ne        | Middle Name                         | Last Name                         |                        |               |            |
| 21.    | Other. S  | pecify: _ | Postage/Bank Fees (\$5.00),         |                                   |                        | 21.           | \$5.00     |
| 22     | Your moi  | nthly exp | pense: Add lines 4 through 21.      |                                   |                        | 22.           | \$3,060.00 |
|        | The resul | t is your | monthly expenses.                   |                                   |                        |               |            |
|        |           |           |                                     |                                   |                        |               |            |
|        |           |           |                                     |                                   |                        |               |            |
| 23.    | Calculate | your m    | onthly net income.                  |                                   |                        |               |            |
|        | 23a.      | Copy I    | ine 12 (your comibined monthly inc  | come) from Schedule I.            |                        | 23a.          | \$3,060.17 |
|        | 23b.      | Сору      | your monthly expenses from line 2   | 2 above.                          |                        | 23b. <b>-</b> | \$3,060.00 |
|        | 23c.      | Subtra    | act your monthly expenses from yo   | ur monthly income.                |                        | 23c.          | \$0.17     |
|        |           | The re    | esult is your monthly net income.   |                                   |                        | _             |            |
|        |           |           |                                     |                                   |                        |               |            |
|        |           |           |                                     |                                   |                        |               |            |
|        |           |           |                                     |                                   |                        |               |            |
|        |           |           |                                     |                                   |                        |               |            |
| 24.    | Do you e  | xpect an  | n increase or decrease in your ex   | penses within the year after yo   | ou file this form?     |               |            |
|        | For exam  | ple, do y | ou expect to finish paying for your | car loan within the year or do y  | rou expect your        |               |            |
|        |           | paymen    | nt to increase or decrease because  | of a modification to the terms of | of your mortgage?      |               |            |
|        | X No      |           |                                     |                                   |                        |               |            |
|        | Yes.      | Е         | xplain Here:                        |                                   |                        |               |            |
|        |           |           |                                     |                                   |                        |               |            |
|        |           |           |                                     |                                   |                        |               |            |
|        |           |           |                                     |                                   |                        |               |            |
|        |           |           |                                     |                                   |                        |               |            |

 Official Form 106J
 Record #
 751406
 Schedule J: Your Expenses
 Page 3 of 3

| Fill in this in                       | formation to ident | ify your case:                    |           |
|---------------------------------------|--------------------|-----------------------------------|-----------|
| Debtor 1                              | Andrea             | Louise                            | Viverito  |
|                                       | First Name         | Middle Name                       | Last Name |
| Debtor 2                              |                    |                                   |           |
| (Spouse, if filing)                   | First Name         | Middle Name                       | Last Name |
| United States  Case Number (If known) |                    | the : <u>NORTHERN</u> District of | (State)   |

## Official Form 106 Dec

### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Sign Below   |   |   |
|--|---|---|
| Did you pay or agree to pay someone who is NOT       | an attorney to help you fill out bankru | ptcv forms?   |
| No   | ,                                       | ,   |
| Yes. Name of Person                                  | ·                                       | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
|  |   |   |
|  |   |   |
| Under penalty of perjury, I declare that I have read | I the summary and schedules filed with  | n this declaration and that they are true and   |
| correct.   |   |   |
| ★ /s/ Andrea Louise Viverito                         | <u> </u>                                |   |
| Signature of Debtor 1                                | Signature of Debtor 2                   |   |
| Date 09/07/2017<br>MM / DD / YYYY                    | Date                                    | ····  |
| יווו ו טט ו Ivilvi                                   | ו טט / ז / טט / ז                       | 111   |

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| Fill in this in           | formation to ident |                                     |                     |  |
|---------------------------|--------------------|-------------------------------------|---------------------|--|
| Debtor 1                  | Andrea First Name  | Louise  Middle Name                 | Viverito  Last Name |  |
| Debtor 2                  |                    |                                     |                     |  |
| (Spouse, if filing)       | First Name         | Middle Name                         | Last Name           |  |
|                           |                    | the : <u>NORTHERN</u> District of _ | (State)             |  |
| Case Number<br>(If known) | ·                  |                                     | _                   |  |

## Official Form 107

### Statement of Financial Affairs for Individuals Filing for Bankruptcy

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| num | per (if known). Answer every question.   |                               | p or any additional pages, time year hand and eace |                               |
|-----|--|-------------------------------|--|-------------------------------|
|     | IT I: Give Details About Your Marital Status and Where Yo                                | I bood Bafana                 |  |                               |
|     | Give Details About Your Marital Status and Where Yo What is your current marital status? | u Lived Before                |  |                               |
| 01. | _  |                               |  |                               |
|     | Married  |                               |  |                               |
|     | Not married  |                               |  |                               |
| 02  | During the last 3 years, have you lived anywhere other tha                               | n where you live nov          | w?   |                               |
|     | No.  |                               | •  |                               |
|     | Yes. List all of the places you lived in the last 3 years. Do                            | not include where ye          | ou live now.                                       |                               |
|     |  |                               |  |                               |
|     | Debtor 1   | Dates Debtor 1<br>lived there | Debtor 2:  | Dates Debtor 2<br>lived there |
| 03  | Within the last 8 years, did you ever live with a spouse or l                            |                               | community property state or territory? (Community  | nved there                    |
|     | property states and territories include Arizona, California, and Wisconsin.)             |                               |  |                               |
|     | No.  |                               |  |                               |
|     | Yes. Make sure you fill out Schedule H: Your Codebtors (                                 | Official Form 106H).          |  |                               |
|     |  |                               |  |                               |
|     | Explain the Sources of Your Income   |                               |  |                               |
|     |  |                               |  |                               |
|     |  |                               |  |                               |
|     |  |                               |  |                               |
|     |  |                               |  |                               |
|     |  |                               |  |                               |
|     |  |                               |  |                               |
|     |  |                               |  |                               |
|     |  |                               |  |                               |
|     |  |                               |  |                               |
|     |  |                               |  |                               |
|     |  |                               |  |                               |
|     |  |                               |  |                               |
|     |  |                               |  |                               |
|     |  |                               |  |                               |
|     |  |                               |  |                               |
|     |  |                               |  |                               |

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Case Number (if known)

Viverito

First Name Middle Name Last Name 04 Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. ☐ No. Yes. Fill in the details Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply (before deductions and Check all that apply (before deductions and exclusions) exclusions) Wages, commissions, Wages, commissions, \$10,615 From January 1 of current year until bonuses, tips bonuses, tips the date you filed for bankruptcy: Operating a business Operating a business Wages, commissions, \$1,250 Wages, commissions, For last calendar year: bonuses, tips bonuses, tips (January 1 to December 31, 2016) Operating a business Operating a business Wages, commissions, \$1,200 Wages, commissions, For the calendar year before that: bonuses, tips bonuses, tips (January 1 to December 31, 2015) Operating a business Operating a business 05 Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Describe below. (before deductions and Describe below. (before deductions and exclusions) exclusions) Pension \$11,439 From January 1 of current year until Child Support \$900 the date you filed for bankruptcy: Rental Income \$3,600 Pension \$15.252 For last calendar year: Child Support \$1,200 (January 1 to December 31, 2016) Rent \$4,800 Pension For last calendar year: \$15,252 Child Support \$1,200 (January 1 to December 31, 2015) \$4,800 Rental Income

Debtor 1

Andrea

Louise

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Louise Viverito Case Number (if known)

|                   | First Name  | Middle Name  | Last Name  |  |   |   |
|-------------------|---|--|--|--|---|---|
| Par               | 13: List Ce   | rtain Payments You Made Before You I   | iled for Bankruptcy                              |  |   |   |
| 06 <b>A</b>       | Are either Debt                                       | or 1's or Debtor 2's debts primarily o   | consumer debts?                                  |  |   |   |
|                   | incurre   | r Debtor 1 nor Debtor 2 has primarily<br>ed by an individual primarily for a pers<br>the 90 days before you filed for bankr  | onal, family, or house                           | hold purpose."                                       |   | as  |
|                   | □No   | o. Go to line 7.   |  |  |   |   |
|                   | tot   | es. List below each creditor to whom you all amount you paid that creditor. Do n ild support and alimony. Also, do not it adjustment on 4/01/16 and every 3 you                | ot include payments f<br>nclude payments to a    | or domestic support ob<br>n attorney for this bankı  | igations, such as ruptcy case.                              |   |
| I                 |   | or 1 or Debtor 2 or both have primari<br>g the 90 days before you filed for bank   | -  | ny creditor a total of \$6                           | 00 or more?   |   |
|                   | □No   | o. Go to line 7.   |  |  |   |   |
|                   | cre   | es. List below each creditor to whom you<br>editor. Do not include payments for do<br>mony. Also, do not include payments to   | mestic support obliga                            | tions, such as child sup                             |   |   |
|                   |   |  | Dates of payments                                | Total amount paid                                    | Amount you still  | owe Was this payment for  |
|                   |   | Ditech Financial LLC 332  Minnesota St Ste 610 Saint Paul  MN 55101  | Monthly  | \$ 3,936   | <u>\$ 167,263</u>   | Mortgage  Car Credit card Loan repayment Suppliers or vendors Other |
| Ir<br>c<br>a<br>s | nsiders include<br>orporations of<br>igent, including | efore you filed for bankruptcy, did you your relatives; any general partners; which you are an officer, director, persone for a business you operate as a support and alimony. | relatives of any generation in control, or owner | al partners; partnership<br>er of 20% or more of the | s of which you are a gener<br>eir voting securities; and ar | ny managing   |
| _                 |   | payments to an insider.  |  |  |   |   |
|                   |   |  | Dates of payment                                 | Total amount paid                                    | Amount you still owe  | Reason for this payment   |
| а                 | in insider?   | efore you filed for bankruptcy, did you<br>ats on debts guaranteed or cosigned b   |  | or transfer any property                             | on account of a debt that b                                 | benefited   |
|                   | No.   | payments to an insider.  |  |  |   |   |
| L                 | 1 00. List all  | paymonto to an industr.  | Dates of payment                                 | Total amount paid                                    | Amount you still owe  | Reason for this payment Include creditor's name                     |
| Par               | 14: Identify  | y Legal actions, Repossessions, and Fo   | reclosures                                       |  |   |   |
|                   |   |  |  |  |   |   |

Andrea

Record # 751406

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| tor 1  | Andrea   | Louise   | Viverito   | Case Number (if known)  |                    |
|--|--|--|--|---|--------------------|
|  | First Name   | Middle Name  | Last Name  |   |                    |
| List   |  | ng personal injury cas   |  | urt action, or administrative proceeding?<br>es, collection suits, paternity actions, support or cust   | ody                |
|  | No.  |  |  |   |                    |
|  | Yes. Fill in the details.  |  |  |   |                    |
|  |  |  | Nature of the case   | Court or agency   | Status of the case |
|  | Capital One Bank Usa I   | Na VS Andrea   | Collection   | Fifth Municipal Division, Cook County   | Pending            |
|  | Viverito   |  |  |   | On appeal          |
|  | CASE NUMBER#15M5   | 32500  |  |   | Concluded          |
|  | OAGE NOWIDEN#19W3  | 52300  |  |   | Concluded          |
|  | Cavalry Spv I Llc VS Ar  | ndrea Viverito   | Collection   | Fifth Municipal Division, Cook County   | Pending            |
|  | CASE NUMBER#17M5   | _  | Collection   | Thir Wullicipal Division, Gook Gounty   | On appeal          |
|  | CASE NUMBER#17MS   | 01970  |  |   | = "                |
|  |  |  |  |   | Concluded          |
|  |  |  |  |   |                    |
|  | Cavalry SPV I, LLC   |  | Collections  | Fifth Municipal Division, Cook County   | Pending            |
|  | <u>V</u>   |  |  |   | On appeal          |
|  | Anrea L. Viverito  |  |  |   | ☐ Concluded        |
|  | 2017 M5 6093   |  |  |   |                    |
| Che  | nin 1 year before you filed<br>eck all that apply and fill ir<br>No. Go to line 11   |  | any of your property repossess   | ed, foreclosed, garnished, attached, seized, or levie   | d?                 |
| _  | Yes. Fill in the informatio  | on below.  |  |   |                    |
| Wit  | Yes. Fill in the informatio  | filed for bankruptcy,  |  | ank or financial institution, set off any amounts fro   | om your accounts   |
| Wit  | Yes. Fill in the informatio  | filed for bankruptcy,  |  | ank or financial institution, set off any amounts fro   | om your accounts   |
| Wittor   | Yes. Fill in the informatio<br>hin 90 days before you f<br>efuse to make a paymen  | filed for bankruptcy,<br>nt because you owed   |  | ank or financial institution, set off any amounts fro   | om your accounts   |
| Witt or I  | Yes. Fill in the information  hin 90 days before you fefuse to make a payment  No. Go to line 11  Yes. Fill in the informatio  | filed for bankruptcy,<br>nt because you owed<br>on below.<br>ed for bankruptcy, w  | d a debt?  as any of your property in the  | ank or financial institution, set off any amounts fro   |                    |
| Witt cou   | Yes. Fill in the information hin 90 days before you fefuse to make a payment No. Go to line 11 Yes. Fill in the information hin 1 year before you file   | filed for bankruptcy,<br>nt because you owed<br>on below.<br>ed for bankruptcy, w  | d a debt?  as any of your property in the  |   |                    |
| Witt cou   | Yes. Fill in the information hin 90 days before you fefuse to make a payment No. Go to line 11 Yes. Fill in the information hin 1 year before you file rt-appointed receiver, a  | filed for bankruptcy,<br>nt because you owed<br>on below.<br>ed for bankruptcy, w  | d a debt?  as any of your property in the  |   |                    |
| Witt cou   | Yes. Fill in the information thin 90 days before you fectuse to make a payment No. Go to line 11  Yes. Fill in the information in 1 year before you file rt-appointed receiver, a fecture of the second of the secon | filed for bankruptcy,<br>nt because you owed<br>on below.<br>ed for bankruptcy, w<br>custodian, or anothe  | d a debt?  as any of your property in the  |   |                    |
| Witt cou   | Yes. Fill in the information thin 90 days before you fecture to make a payment No. Go to line 11  Yes. Fill in the information in 1 year before you file rt-appointed receiver, a line.  Yes.  List Certain Gifts and  | filed for bankruptcy,<br>nt because you owed<br>on below.<br>ed for bankruptcy, w<br>custodian, or anothe  | d a debt?  as any of your property in the er official?                                   | possession of an assignee for the benefit of credit   |                    |
| Witt cou   | Yes. Fill in the information thin 90 days before you fecture to make a payment No. Go to line 11  Yes. Fill in the information in 1 year before you file rt-appointed receiver, a line.  Yes.  List Certain Gifts and  | filed for bankruptcy,<br>nt because you owed<br>on below.<br>ed for bankruptcy, w<br>custodian, or anothe  | d a debt?  as any of your property in the er official?                                   |   |                    |
| Witter Could Witter Witter Witter Could Witt | Yes. Fill in the information thin 90 days before you fecture to make a payment No. Go to line 11  Yes. Fill in the information in 1 year before you file rt-appointed receiver, a line.  Yes.  List Certain Gifts and  | filed for bankruptcy,<br>nt because you owed<br>on below.<br>ed for bankruptcy, w<br>custodian, or anothe  | d a debt?  as any of your property in the er official?                                   | possession of an assignee for the benefit of credit   |                    |
| Witt cou   | Yes. Fill in the information  hin 90 days before you fefuse to make a payment  No. Go to line 11  Yes. Fill in the information  nin 1 year before you file  rt-appointed receiver, a control  No.  Yes.  List Certain Gifts and  hin 2 years before you file   | filed for bankruptcy, nt because you owed on below.  ed for bankruptcy, w custodian, or another of the contributions of the contributio | d a debt?  as any of your property in the er official?                                   | possession of an assignee for the benefit of credit   |                    |
| Witt cou   | Yes. Fill in the information  hin 90 days before you for the fuse to make a payment. No. Go to line 11  Yes. Fill in the information in 1 year before you file rt-appointed receiver, a second of the fuse of the  | filed for bankruptcy, nt because you owed on below.  ed for bankruptcy, we custodian, or another the contributions are contributions.  iled for bankruptcy, we each gift.  | d a debt?  as any of your property in the er official?  did you give any gifts with a to | possession of an assignee for the benefit of credit   | dors, a            |
| Witt cou   | Yes. Fill in the information thin 90 days before you fefuse to make a payment No. Go to line 11  Yes. Fill in the information in 1 year before you file rt-appointed receiver, a service.  List Certain Gifts and thin 2 years before you file No.  Yes. Fill in the details for thin 2 years before you file No.  | filed for bankruptcy, nt because you owed on below.  ed for bankruptcy, we custodian, or another the contributions are contributions.  iled for bankruptcy, we each gift.  | d a debt?  as any of your property in the er official?  did you give any gifts with a to | possession of an assignee for the benefit of credit<br>of credit of c | tors, a            |
| Witt Witt  | Yes. Fill in the information thin 90 days before you fefuse to make a payment No. Go to line 11  Yes. Fill in the information in 1 year before you file rt-appointed receiver, a second of the control of | filed for bankruptcy, nt because you owed on below. ed for bankruptcy, w custodian, or anothed of contributions iled for bankruptcy, a each gift.  | d a debt?  as any of your property in the er official?  did you give any gifts with a to | possession of an assignee for the benefit of credit<br>of credit of c | dors, a            |
| Witt Witt  | Yes. Fill in the information thin 90 days before you fefuse to make a payment No. Go to line 11  Yes. Fill in the information in 1 year before you file rt-appointed receiver, a service.  List Certain Gifts and thin 2 years before you file No.  Yes. Fill in the details for thin 2 years before you file No.  | filed for bankruptcy, nt because you owed on below. ed for bankruptcy, w custodian, or anothed of contributions iled for bankruptcy, a each gift.  | d a debt?  as any of your property in the er official?  did you give any gifts with a to | possession of an assignee for the benefit of credit<br>of credit of c | dors, a            |
| Witte  | Yes. Fill in the information thin 90 days before you fefuse to make a payment No. Go to line 11  Yes. Fill in the information in 1 year before you file rt-appointed receiver, a service.  List Certain Gifts and hin 2 years before you file No.  Yes. Fill in the details for hin 2 years before you file No.  Yes. Fill in the details for No.  Yes. Fill in the details for  | filed for bankruptcy, nt because you owed on below. ed for bankruptcy, w custodian, or anothed of contributions iled for bankruptcy, a each gift.  | d a debt?  as any of your property in the er official?  did you give any gifts with a to | possession of an assignee for the benefit of credit<br>of credit of c | dors, a            |
| Witt cou   | Yes. Fill in the information thin 90 days before you fefuse to make a payment No. Go to line 11  Yes. Fill in the information in 1 year before you file rt-appointed receiver, a second with the information in 1 year before you file rt-appointed receiver, a second with the information in 1 year before you file in 2 years before you file No.  Yes. Fill in the details for hin 2 years before you file No.  Yes. Fill in the details for thin 2 years before you file No.  Yes. Fill in the details for thin 2 years before you file No.   | filed for bankruptcy, not because you owed on below.  In below.  In below.  In below.  In defor bankruptcy, we custodian, or another of the bankruptcy, and contributions of the bankruptcy, or each gift.  In each gift.  In each gift.   | as any of your property in the er official?  did you give any gifts with a to            | possession of an assignee for the benefit of credit<br>of credit of c | y charity?         |
| Witt cou   | Yes. Fill in the information thin 90 days before you fefuse to make a payment No. Go to line 11  Yes. Fill in the information in 1 year before you file rt-appointed receiver, a service.  List Certain Gifts and hin 2 years before you file no.  Yes. Fill in the details for hin 2 years before you file no.  Yes. Fill in the details for hin 2 years before you file no.  Yes. Fill in the details for hin 2 years before you file no.  | filed for bankruptcy, not because you owed on below.  In below.  In below.  In below.  In defor bankruptcy, we custodian, or another of the bankruptcy, and contributions of the bankruptcy, or each gift.  In each gift.  In each gift.   | as any of your property in the er official?  did you give any gifts with a to            | possession of an assignee for the benefit of credit  otal value of more than \$600 per person?  ibutions with a total value of more than \$600 to an  | y charity?         |
| Witt cou   | Yes. Fill in the information thin 90 days before you fefuse to make a payment No. Go to line 11  Yes. Fill in the information in 1 year before you file rt-appointed receiver, a second of the control of | filed for bankruptcy, nt because you owed on below.  ed for bankruptcy, we custodian, or another defect the custodian of the custodian or another defect for bankruptcy, we each gift.  elect for bankruptcy, we each gift.  | as any of your property in the er official?  did you give any gifts with a to            | possession of an assignee for the benefit of credit  otal value of more than \$600 per person?  ibutions with a total value of more than \$600 to an  | y charity?         |
| Witt cou   | Yes. Fill in the information thin 90 days before you fefuse to make a payment No. Go to line 11  Yes. Fill in the information in 1 year before you file rt-appointed receiver, a service.  List Certain Gifts and thin 2 years before you file no.  Yes. Fill in the details for thin 2 years before you file no.  Yes. Fill in the details for thin 2 years before you file no.  Yes. Fill in the details for thin 1 year before you file nobling?  No.  Yes. Fill in the details for thin 1 year before you file nobling?  | filed for bankruptcy, not because you owed on below.  ed for bankruptcy, we custodian, or another of the bankruptcy, and contributions illed for bankruptcy, are each gift.  It each gift.  It each gift.  It each gift.   | as any of your property in the er official?  did you give any gifts with a to            | possession of an assignee for the benefit of credit  otal value of more than \$600 per person?  ibutions with a total value of more than \$600 to an  | y charity?         |

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Case Number (if known) \_

Viverito

Louise

Andrea

|    | First Name Middle Name  | Last Name  |                               |                            |  |  |
|----|---|--|-------------------------------|----------------------------|--|--|
| 16 | Within 1 year before you filed for bankrup<br>consulted about seeking bankruptcy or p<br>Include any attorneys, bankruptcy petitio  | reparing a bankruptcy petition?  |                               |                            | e you                                    |  |
|    | <ul><li>No.</li><li>Yes. Fill in the details</li></ul>  |  |                               |                            |  |  |
|    | Party Contact Info  | Description and value of   | any property transferred      | Date paymer or transfer    | nt Amount of payment                     |  |
|    | Geraci Law L.L.C.   | _  |                               |                            | \$700.00                                 |  |
|    | 55 E. Monroe Street #3400   |  |                               |                            |  |  |
|    | Chicago,IL 60603  |  |                               |                            |  |  |
|    |   |  |                               |                            |  |  |
|    | Party Contact Info  | Description and value of   | any property transferred      | Date paymer<br>or transfer | nt Amount of payment                     |  |
|    | Hananwill Credit Counseling   | Credit Counseling Service  | s                             | 2017                       | \$25.00                                  |  |
|    | 115 N. Cross St.  | _  |                               |                            |  |  |
|    | Robinson, IL 62454  | _  |                               |                            |  |  |
|    |   | _  |                               |                            |  |  |
|    |   |  |                               |                            |  |  |
|    |   |  |                               |                            |  |  |
| 17 | Within 1 year before you filed for bankrup promised to help you deal with your cred Do not include any payment or transfer the No.  Yes. Fill in the details.   | itors or to make payments to your cre                                      |                               | sfer any property to anyon | e who                                    |  |
| 18 | Within 2 years before you filed for bankru<br>transferred in the ordinary course of your<br>Include both outright transfers and transf<br>Do not include gifts and transfers that yo  | r business or financial affairs?<br>fers made as security (such as the gra | anting of a security intere   |                            | -  |  |
|    | ■ No.  ☐ Yes. Fill in the details for each gift.  |  |                               |                            |  |  |
| 19 | Within 10 years before you filed for bankr<br>beneficiary? (These are often called asse   |  | to a self-settled trust or s  | similar device of which yo | u are a                                  |  |
|    | <ul><li>No.</li><li>☐ Yes. Fill in the details for each gift.</li></ul>   |  |                               |                            |  |  |
| F  | art 8: List Certain Financial Accounts, Ins   | struments, Safe Deposit Boxes, and Sto                                     | rage Units                    |                            |  |  |
| 20 | Within 1 year before you filed for bankrup sold, moved, or transferred?   | otcy, were any financial accounts or in                                    | nstruments held in your       | name, or for your benefit, | closed,                                  |  |
|    | lnclude checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. |  |                               |                            |  |  |
|    | No.   |  |                               |                            |  |  |
|    | Yes. Fill in the details.   | Look Addition  | T                             | Data and                   |  |  |
|    |   | Last 4 digits of account number  | Type of account or instrument |                            | ast balance before<br>losing or transfer |  |
|    |   |  |                               |                            |  |  |
|    |   |  |                               |                            |  |  |

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| ebto | r 1      | Andrea                                    | Louise   | Viverito   | Case Number (if known)   |                       |
|------|----------|---|--|--|--|-----------------------|
|      |          | First Name                                | Middle Name  | Last Name  |  |                       |
| 21   |          | ou now have, or d<br>n, or other valuable | •  | ar before you filed for bankruptcy,                              | any safe deposit box or other depository   | for securities,       |
|      | 1        | No.                                       |  |  |  |                       |
|      | □ \      | Yes. Fill in the detai                    | ils.   |  |  |                       |
|      |          |   |  | Who else had access to it?                                       | Describe the contents  | Do you still have it? |
| 22   | Have     | e vou stored prope                        | erty in a storage unit or                                  | place other than your home within                                | 1 year before you filed for bankruptcy?  | nave it?              |
|      | _        | No.                                       | ,  | ,  | ,  |                       |
|      | =        | Yes. Fill in the detai                    | ils  |  |  |                       |
|      | _        |   |  | Who else has or had access to it?                                | Describe the contents  | Do you still          |
|      |          |   |  |  |  | have it?              |
| P    | art 9:   | Identify Proper                           | ty You Hold or Control fo                                  | r Someone Else   |  |                       |
| 23   | -        | ou hold or control                        | l any property that som                                    | eone else owns? Include any prope                                | erty you borrowed from, are storing for, o   | hold in trust         |
|      | 1        | No.                                       |  |  |  |                       |
|      | □ '      | Yes. Fill in the detai                    |  |  |  |                       |
|      |          |   |  | Where is the property?   | Describe the property  | Value                 |
| Pa   | rt 10:   | Give Details Al                           | oout Environmental Infor                                   | mation   |  |                       |
| For  | the p    | ourpose of Part 10,                       | , the following definition                                 | ns apply:  |  |                       |
| ı    | hazaı    | rdous or toxic sub                        | stances, wastes, or ma                                     | _  | ning pollution, contamination, releases of<br>water, groundwater, or other medium,<br>stes, or material. |                       |
|      |          | -   | n, facility, or property a<br>ate, or utilize it, includir |  | law, whether you now own, operate, or ut   | tilize                |
|      |          |   |  | nmental law defines as a hazardous<br>taminant, or similar term. | s waste, hazardous substance, toxic  |                       |
| Rep  | ort a    | II notices, releases                      | s, and proceedings that                                    | you know about, regardless of who                                | en they occurred.  |                       |
| 24   | Has      | any governmental                          | unit notified you that y                                   | ou may be liable or potentially liab                             | le under or in violation of an environment   | al law?               |
|      | <b>1</b> | No.                                       |  |  |  |                       |
|      |          | Yes. Fill in the detai                    | ils.   |  |  |                       |
|      |          |   |  | Governmental unit  | Environmental law, if you know it  | Date of notice        |
| 25   | Have     | e vou notified anv                        | governmental unit of a                                     | ny release of hazardous material?                                |  |                       |
|      | _        | No.                                       | •  | ,  |  |                       |
|      | =        | No.<br>Yes. Fill in the detai             | ils  |  |  |                       |
|      |          |   |  | Governmental unit  | Environmental law, if you know it  | Date of notice        |
| 26   |          |   |  |  |  |                       |
| 26   | Have     | e you been a party                        | in any judicial or admi                                    | nistrative proceeding under any en                               | vironmental law? Include settlements and   | orders.               |
|      | _        | No.                                       |  |  |  |                       |
|      | П,       | Yes. Fill in the detai                    |  | Court or agency  | Nature of the case   | Status of the case    |
|      |          |   |  | court or agency  | Nature of the case   | Status of the case    |
| Pa   | rt 11:   | Give Details Ab                           | oout Your Business or Co                                   | nnections to Any Business  |  |                       |
| 27   | With     | in 4 years before                         | you filed for hankruntcy                                   | did you own a business or have a                                 | any of the following connections to any bu   | ısiness?              |
|      |          |   |  | trade, profession, or other activity                             | -  |                       |
|      |          | _   |  | y (LLC) or limited liability partnersh                           |  |                       |
|      |          | ☐<br>☐A partner in a p                    |  | , , ,  |  |                       |
|      |          |   | ctor, or managing exec                                     | utive of a corporation   |  |                       |
|      | ĺ        | =   |  | r equity securities of a corporation                             |  |                       |
|      |          |   |  |  |  |                       |

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Document Page 39 of 54 Viverito Andrea Louise Case Number (if known) \_ First Name Middle Name Last Name

| Andrea Viverito  | Describe the nature of the business   | Employer Identification number  |
|--|---|---|
| 29 Cour Montreal   |   | Do not include Social Security number or  |
| Palos Hill, IL 60465   | Home Healthcare   | EIN:  |
|  | Name of accountant or bookkeeper  | Dates business existed  |
|  |   | 2017  |
| Andrea's Housekeeping  | Describe the nature of the business   | Employer Identification number  |
| 29 Cour Montreal   | - Havealaanian  | Do not include Social Security number or  |
| Palos Hill, IL 60465   | Housekeeping -  | EIN:  |
|  | Name of accountant or bookkeeper  | Dates business existed  |
|  |   | 2010-2016   |
| Yes. Fill in the details.  | Date issued   |   |
| No. Yes. Fill in the details. Sign Below   |   |   |
| Yes. Fill in the details.  Sign Below  e read the answers on this Statemers are true and correct. I understance the statement of the statement | Date issued  nent of Financial Affairs and any attachments, and I dec<br>tand that making a false statement, concealing propert<br>can result in fines up to \$250,000, or imprisonment for   | y, or obtaining money or property by fraud  |
| Yes. Fill in the details.  Sign Below  e read the answers on this Statem vers are true and correct. I underst nnection with a bankruptcy case of S.C. §§ 152, 1341, 1519, and 3571.  | Date issued  nent of Financial Affairs and any attachments, and I declared that making a false statement, concealing propertican result in fines up to \$250,000, or imprisonment for   | y, or obtaining money or property by fraud  |
| Yes. Fill in the details.  Sign Below  e read the answers on this Statemers are true and correct. I understance tion with a bankruptcy case of S.C. §§ 152, 1341, 1519, and 3571.  Is/ Andrea Louise Viverito  | Date issued  nent of Financial Affairs and any attachments, and I dec<br>tand that making a false statement, concealing propert<br>can result in fines up to \$250,000, or imprisonment for   | y, or obtaining money or property by fraud  |
| Yes. Fill in the details.  Sign Below  e read the answers on this Statem ers are true and correct. I understancetion with a bankruptcy case of S.C. §§ 152, 1341, 1519, and 3571.  /s/ Andrea Louise Viverito  Signature of Debtor 1  Date 09/07/2017  | Date issued  nent of Financial Affairs and any attachments, and I declared that making a false statement, concealing propertican result in fines up to \$250,000, or imprisonment for .  Signature of Debtor 2  | y, or obtaining money or property by fraud<br>up to 20 years, or both.  |
| Yes. Fill in the details.  Sign Below  eread the answers on this Statemers are true and correct. I understancetion with a bankruptcy case of S.C. §§ 152, 1341, 1519, and 3571.  Isl Andrea Louise Viverito  Signature of Debtor 1   | Date issued  ment of Financial Affairs and any attachments, and I declared that making a false statement, concealing propertican result in fines up to \$250,000, or imprisonment for .  Signature of Debtor 2  | y, or obtaining money or property by fraud<br>up to 20 years, or both.  |
| Yes. Fill in the details.  Sign Below  e read the answers on this Statemers are true and correct. I understance tion with a bankruptcy case of S.C. §§ 152, 1341, 1519, and 3571.  /s/ Andrea Louise Viverito  Signature of Debtor 1  Date 09/07/2017  MM / DD / YYYY  | Date issued  nent of Financial Affairs and any attachments, and I declared that making a false statement, concealing propertican result in fines up to \$250,000, or imprisonment for .  Signature of Debtor 2  | y, or obtaining money or property by fraud up to 20 years, or both.   |
| Yes. Fill in the details.  Sign Below  eread the answers on this Statem eres are true and correct. I understancetion with a bankruptcy case of S.C. §§ 152, 1341, 1519, and 3571.  Is/ Andrea Louise Viverito  Signature of Debtor 1  Date 09/07/2017  MM / DD / YYYY  Tou attach additional pages to You look.  | Date issued  ment of Financial Affairs and any attachments, and I decitand that making a false statement, concealing propertican result in fines up to \$250,000, or imprisonment for Signature of Debtor 2  Date   | y, or obtaining money or property by fraud up to 20 years, or both.   |
| Yes. Fill in the details.  Sign Below  The read the answers on this Statemers are true and correct. I understance tion with a bankruptcy case of S.C. §§ 152, 1341, 1519, and 3571.  Is/Andrea Louise Viverito  Signature of Debtor 1  Date 09/07/2017  MM / DD / YYYY  Ou attach additional pages to You described to the statement of t | Date issued  Thent of Financial Affairs and any attachments, and I decided that making a false statement, concealing propertican result in fines up to \$250,000, or imprisonment for signature of Debtor 2  Date  MM / DD / YY  The Statement of Financial Affairs for Individuals Filing to the statement of Financial Affairs for Individuals Fi | y, or obtaining money or property by fraud up to 20 years, or both.  YYY  For Bankruptcy (Official Form 107)? |
| Yes. Fill in the details.  Sign Below  e read the answers on this Statem vers are true and correct. I understancetion with a bankruptcy case of S.C. §§ 152, 1341, 1519, and 3571.  Is/ Andrea Louise Viverito  Signature of Debtor 1  Date 09/07/2017  MM / DD / YYYY  You attach additional pages to You with a bankruptcy case of S.C. §§ 152, 1341, 1519, and 3571.  | Date issued  ment of Financial Affairs and any attachments, and I decitand that making a false statement, concealing propertican result in fines up to \$250,000, or imprisonment for Signature of Debtor 2  Date   | y, or obtaining money or property by fraud up to 20 years, or both.  YYY  For Bankruptcy (Official Form 107)? |

| Fill in this in              | Caco 17                  |                                     | Filed 00/07/17                                      | d 09/07/17 16:30:0<br>of 54   | 05 Desc Main  |      |
|------------------------------|--------------------------|-------------------------------------|---|-------------------------------|---|------|
|                              |                          | ly your outo.                       | U   | 01 54                         |   |      |
| Debtor 1                     | Andrea                   | Louise                              | Viverito  |                               |   |      |
|                              | First Name               | Middle Name                         | Last Name   |                               |   |      |
| Debtor 2 (Spouse, if filing) | First Name               | Middle Name                         | Last Name   |                               |   |      |
|                              |                          |                                     |   |                               |   |      |
| United States                | s Bankruptcy Court for t | the : <u>NORTHERN</u> District of _ | ILLINOIS<br>(State)                                 |                               |   |      |
| Case Numbe<br>(If known)     | r                        |                                     | _   |                               | Check if this is an                                 |      |
| (II KIIOWII)                 |                          |                                     |   |                               | amended filing                                      |      |
| Official F                   | orm 108                  |                                     |   |                               |   |      |
| Stateme                      | nt of Intent             | tion for Individua                  | ils Filing Under Chapte                             | er 7                          |   | 12/1 |
| If you are an in             | dividual filing unde     | r chapter 7, you must fill out      | this form if:                                       |                               |   |      |
|                              | ve claims secured b      |                                     |   |                               |   |      |
| =                            |                          | erty and the lease has not exp      | oired.<br>file your bankruptcy petition or by the ( | date set for the meeting of c | raditors  |      |
|                              |                          | -                                   | se. You must also send copies to the c              | _                             |   |      |
|                              |                          |                                     | e equally responsible for supplying co              |                               |   |      |
| Both debtors n               | nust sign and date t     | he form.                            |   |                               |   |      |
| Be as complete               | e and accurate as p      | ossible. If more space is nee       | ded, attach a separate sheet to this for            | m. On the top of any addition | nal pages,  |      |
| write your nam               | e and case number        | (if known).                         |   |                               |   |      |
| Part 1:                      | List Your Creditors V    | Nho Have Secured Claims             |   |                               |   |      |
| For any cre information      | <del>-</del>             | ed in Part 1 of Schedule D: C       | reditors Who Have Claims Secured by                 | Property (Official Form 106D  | D), fill in the                                     |      |
| Identify the                 | creditor and the pr      | operty that is collateral           | What do you intend to do w secures a debt?          | vith the property that        | Did you claim the property as exempt on Schedule C? |      |
| Creditor's                   | 3                        |                                     | ☐ Surrender the pro                                 | perty                         | No  |      |
| name:                        | Ditech Fina              | ancial LLC                          | Retain the propert                                  | •                             | —<br>□ Yes  |      |
| Dogorintic                   | on of 29 Cour Mo         | ontreal Palos Hills IL 60465        | Retain the propert                                  |                               | □ res   |      |
| Description property         | on or 20 ood we          | THICAIT GIOSTINIS IE 00400          | Reaffirmation Agr                                   | •                             |   |      |
| securing                     | debt:                    |                                     | Retain the propert                                  |                               |   |      |
|                              |                          |                                     | <u> </u>  |                               | <del>-</del><br>                                    |      |
| Creditor's                   | <b>.</b>                 |                                     | Surrender the pro                                   | perty                         | □ No  |      |
| name:                        |                          |                                     | Retain the propert                                  | •                             | ☐ Yes   |      |
| Dogorintic                   | on of                    |                                     | Retain the propert                                  | -                             | □ 163   |      |
| Description property         | on or                    |                                     | Reaffirmation Agr                                   | eement.                       |   |      |
| securing                     | debt:                    |                                     | Retain the propert                                  | ty and [explain]:             | _   |      |
|                              |                          |                                     |   |                               |   |      |
| Creditor's                   | 3                        |                                     | Surrender the pro                                   | perty                         | □ No  |      |
| name:                        |                          |                                     | Retain the propert                                  | ty and redeem it              | —<br>□ Yes  |      |
| Dogorintic                   | on of                    |                                     | Retain the propert                                  | ty and enter into a           | ☐ 1C3   |      |
| Description property         | OH OI                    |                                     | Reaffirmation Agr                                   | -                             |   |      |
| securing                     | debt:                    |                                     | Retain the propert                                  |                               |   |      |
|                              |                          |                                     |   |                               |   |      |
| Creditor's                   | <br>S                    |                                     | Surrender the pro                                   | perty                         | □ No  |      |
| name:                        |                          |                                     | Retain the propert                                  | •                             | _   |      |
| Descript:                    | on of                    |                                     | Retain the propert                                  | -                             | ∐ Yes   |      |
| Description property         | OU OT                    |                                     | Reaffirmation Agr                                   | -                             |   |      |
| securing                     | debt:                    |                                     | Retain the propert                                  |                               |   |      |
| ا ع                          |                          |                                     |   | · · · · —                     |   |      |

Debtor 1

Andrea

Case 17-26845

Doc 1

Filed 09/07/17 Entered 09/07/17 16:30:05

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Desc Main

First Name

List Your Unexpired Personal Property Leases

| 5  |  |
|--|--|
| For any unexpired personal property lease that you listed in Schedule G: Executory Co      |  |
| fill in the information below. Do not list real estate leases. Unexpired leases are leases |  |
| ended. You may assume an unexpired personal property lease if the trustee does not a       | ssume it. 11 U.S.C. § 365(p)(2).         |
| Describe your unexpired personal property leases   | Will the lease be assumed?               |
| Lessor's name:   | ☐ No                                     |
| Lessol s hame.   |  |
| Description of leased  | Yes                                      |
| property:  |  |
| p. op o. v.  |  |
| Lessor's name:   | ☐ No                                     |
|  |  |
| Description of leased  | ☐ Yes                                    |
| property:  |  |
|  |  |
| Lessor's name:   | □No                                      |
|  |  |
| Description of leased  | ☐ Yes                                    |
| property:  |  |
|  |  |
| Lessor's name:   | □No                                      |
|  | Yes                                      |
| Description of leased  |  |
| property:  |  |
|  |  |
| Lessor's name:   | □No                                      |
|  | □Yes                                     |
| Description of leased  |  |
| property:  |  |
|  | П.,                                      |
| Lessor's name:   | □No                                      |
| B 16 11 11   | □Yes                                     |
| Description of leased property:  |  |
| ргоролу.   |  |
| Lessor's name:   | □ No                                     |
| Lesson S name.   |  |
| Description of leased  | Yes                                      |
| property:  |  |
|  |  |
|  |  |
| Part 3: Sign Below   |  |
| Inder penalty of perjury, I declare that I have indicated my intention about any property  | of my estate that secures a debt and any |
| personal property that is subject to an unexpired lease.                                   | -  |
| -<br>-   |  |
| 🗶 /s/ Andrea Louise Viverito   |  |
| Signature of Debtor 1 Signature of Debtor  | 2  |
|  |  |
| Date   |  |
| ווווי סטי וייווי אוויו ויי סטי וייווי ויי ווויי ווייי ווייי ווייייייי                      |  |

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B2030 (Form 2030) (12/15)

# United States Bankruptcy Court NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

| In | re   |                           |                         |                      |           |
|----|--|---------------------------|-------------------------|----------------------|-----------|
| An | drea Louise Viverito / Debtor  |                           | Case No:                |                      |           |
|    |  |                           | Chapter:                | Chapter 7            |           |
|    | DISCLOSURE OF COM  | MPENSATION OF AT          | TORNEY FOR DEF          | BTOR                 |           |
|    | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(Inpensation paid to me within one year before the filing of t dered or to be rendered on behalf of the debtor(s) in content | he petition in bankruptc  | y, or agreed to be paid | d to me, for service | ces       |
|    | For legal services, I have agreed to accept  | \$700.00                  |                         |                      |           |
|    | Prior to the filing of this statement I have received  | \$700.00                  |                         |                      |           |
|    | Balance Due  | \$0.00                    |                         |                      |           |
| 2. | The source of the compensation paid to me was:   |                           |                         |                      |           |
|    | Debtor(s) Other: (specify)   |                           |                         |                      |           |
| 3. | The source of compensation to be paid to me is:  |                           |                         |                      |           |
|    | Debtor(s) Other: (specify)   |                           |                         |                      |           |
| 4. | I have not agreed to share the above-disclosed comp of my law firm.  | pensation with any other  | person unless they ar   | e members and a      | ssociates |
| 5. | I have agreed to share the above-disclosed compens of my law firm. A copy of the agreement, together attached.  In return for the above-disclosed fee, I have agreed to ren        | with a list of the names  | of the people sharing   | in the compensat     |           |
|    | case, including:   |                           |                         | ,                    |           |
|    | a. Analysis of the debtor's financial situation, and reno  | dering advice to the debt | or in determining wh    | ether to file a peti | ition in  |
|    | bankruptcy;  |                           |                         |                      |           |
|    | b. Preparation and filing of any petition, schedules, sta  | tements of affairs and pl | an which may be requ    | uired;               |           |
| 6. | By agreement with the debtor(s), the above-disclosed fee<br>Fee does NOT include any work done post-filing.  | does not include the fol  | lowing service:         |                      |           |
|    | C  | CERTIFICATION             |                         |                      |           |
|    | I certify that the foregoing is a complete payment to me for representation of the debte   |                           | -                       | or                   |           |
|    | Date: 09/07/2017   | /s/ Steven Scott Camp     |                         |                      |           |
|    | Date   | Signature of Attorney     | <del> </del>            |                      |           |
|    |  | Geraci Law L.L.C.         |                         |                      |           |

Page 1 of 1 Record # 751406

Name of law firm

Date: 9/7/2017 Consultation Attorney: MMA

Record #: 751-406



## Retainer Agreement Chapter 7 - Pre-filing

| Services before filing in Court: I retain Geraci Law L.L.C. to prepare to file a Chapter 7 bankruptcy petition in court. I agree to pay, by debit only, a flat fee for services before filing in court of \$ _700.00 at \$ {} boday, \$ {} per {} starting {  |
|---|
| start preparing your documents as soon as you sign this contract. Work before signing is no charge. Work or Costs advanced AFTER filing in Court is not included in the pre-filing amount, unless you pay us for it in advance:  After we file your Chapter 7 bankruptcy in Court, we will advance your Court Cost of \$335, and the flat fee for services after case filing is   |
| \$ 995.00 & \$335 = \$ 1,330.00 total flat fee. We will present you with an agreement to repay the \$335, and pay a fee for our services after filing through Discharge or case closing without discharge. Whether or not you sign a post-filing agreement is entirely coluntary: you are not required to retain Geraci Law for post-bankruptcy services. You may hire some other law firm to finish your bankruptcy and Geraci Law may withdraw from representing you.   |
| The flat fee for pre-filing work pays for: consultation after hiring us, (before retaining us is free) preparation petition and schedules, means test & statement of financial affairs; phone calls, emails, web messages; processing and reviewing documents that we requested from you including faxes, email attachments, web uploads and mail; office appointment to review and sign your petition; filing your case in court. Excluded: appearance in any court of proceeding; taking calls from your creditors or bill collectors. If you decide to pre-pay, or pay for ALL services before and after we file your case in court, all work until case closing is included except: missed section 341 meetings; amendments to schedules; adversary proceedings; any motions including to reopen, avoid judgment liens, for enlargement of time; any contested matter including but not limited to objections to exemptions, motions to dismiss; attending rule 2004 examinations; reviewing documents that we did not specifically request from you; appearance other than bankruptcy court.   |
| Flat fee. With "flat fee", rather than hourly, you know in advance your entire cost unless additional work is required and it usually is cheaper, but you may choose to pay for our services billed hourly at \$75 -\$450/hour, and pay in advance a security retaier, which may cost you more, or less than a flat fee. Advance Payment Retainer. Payments on flat fee or hourly become our property on payment and are deposited into our operating account, not into a client trust account. We will only refund unearned fees You may enter into a security retainer agreement with another law firm: we will not because you may lose funds held in our trust account which may be assets in a Chapter 7.  |
| <b>Termination</b> . If you decide not to proceed, delay, fail to respond, fail to pay my attorneys or provide all information & sign my petition according to this schedule, I agree that Geraci Law may discontinue work and charge me for the work done to date at hourly rates shown above. We will only refund fees not earned. <b>Wisconsin</b> : We will submit any unresolved dispute about the fee to binding arbitration within 30 days of receiving written notice of the dispute. You may file a claim with the Wisconsin Lawyers' Fund for Client Protection if the we fail to provide a refund of unearned advanced fees. If you dispute the amount of the fee and want that dispute to be submitted to binding arbitration, you must provide written notice of the dispute to Geraci Law within 30 days of the mailing of the accounting. If we are unable to resolve the dispute to the satisfaction of you within 30 days after notice of the dispute from the client, we shall submit the dispute to binding arbitration.   |
| Time matters: You agree: to fully cooperate with us and provide all information required; use Client Corner and not to cause excessive work; that more than one attorney or staff will work on your file there is no extra charge for the entire Geraci Law Team, unlike single attorney "law firms". Change in circumstances: This flat fee is based on the facts you told us. If that changes, your fee may change. Exemption laws only protect a limited amount of property. File Chapter 13 if you have property not claimed as exempt, or risk turn over "non-exempt" property to a Trustee. No guarantee of Discharge Creditors or others may object to a chapter 7 discharge of certain debts or to any discharge, for a variety of reasons. Debts not discharged: student oans; educational debts and tuition; most tax debts; undisclosed debts; maintenance or support; fines; fraud, stealing or intentional injury claims, debts after filing including HOA dues; other debts listed in your green folder as usually not discharged. No discharge if you don't take the 2nd educational course.  I will not transfer or acquire any property or incur any credit or debt before filing, and I must make full disclosure of all income, expenses, debt |
| ate: 9,7,17 x water Survive (Joint Debtor)  |
| Aftorney for the Debtor(s), Representing Geraci Law L.L.C. rev 161112   |
| · (// -   |

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# UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re

Andrea Louise Viverito / Debtor

Bankruptcy Docket #:

Judge:

| ١   | /FRIFI | CAT           | ION. | OF  | CREDI' | <b>TOR</b> | MΔ  | TRIX |
|-----|--------|---------------|------|-----|--------|------------|-----|------|
| - 1 |        | $\cup \cap I$ |      | OI. | CKLDI  | IUN        | 171 |      |

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

Dated: 09/07/2017 /s/ Andrea Louise Viverito

**Andrea Louise Viverito** 

X Date & Sign

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<sup>\*</sup> Joint debtors must provide information for both spouses. Penalty for making a false statement or concealing property: Fine up to \$500,000 or up to 5 years imprisonment or both. 18 U.S.C. 152 and 3571.

### UNITED STATES BANKRUPTCY COURT

# NOTICE TO CONSUMER DEBTOR(S) UNDER §342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly- addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

#### 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

### Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total fee \$335

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are

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Form B 201A, Notice to Consumer Debtor(s)

In re Andrea Louise Viverito / Debtor

Page 2

found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

# <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

#### Chapter 11: Reorganization (\$1,167 filling fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

#### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

#### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

| Dated: 09/07/2017 | /s/ Andrea Louise Viverito  |  |  |
|-------------------|-----------------------------|--|--|
|                   | Andrea Louise Viverito      |  |  |
|                   |                             |  |  |
| Dated: 09/07/2017 | /s/ Steven Scott Camp       |  |  |
|                   | Attorney: Steven Scott Camp |  |  |

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Last Name

Middle Name

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Andrea Louise Viverito Case Number (if known)

| 6.                                     | What kind of debts do                               | 16a. Are your debts primarily c  | consumer debts? Consumer debts are defi  | ned in 11 U.S.C. § 101(8)<br>urpose."                              |  |  |  |
|--|---|--|--|--|--|--|--|
|  | you have?   | as "incurred by an individual primarily for a personal, family, or household purpose."                     |  |  |  |  |  |
|  |   | Yes. Go to line 17.  |  |  |  |  |  |
|  |   | 16b. Are your debts primarily be money for a business or inves   | <b>Dusiness debts?</b> Business debts are debts tment or through the operation of the busines              | that you incurred to obtain s or investment.                       |  |  |  |
|  |   | No. Go to line 16c. Yes. Go to line 17.  |  |  |  |  |  |
|  |   | <b>-</b>   | ve that are not consumer debts or business de  | ebts.  |  |  |  |
|  |   | Tot. State the type of debts you ow  | to that are not concurred desic or passives a  |  |  |  |  |
| ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | Are you filing under                                | ☐ No. I am not filing under Cha  | apter 7. Go to line 18.  |  |  |  |  |
|  | Chapter 7?  | <del></del>  | r 7. Do you estimate that after any exempt p   | conerty is excluded and  |  |  |  |
|  | Do you estimate that after any exempt property is   | administrative expenses  | s are paid that funds will be available to distrib   | oute to unsecured creditors?                                       |  |  |  |
|  | excluded and  | No.  | -  |  |  |  |  |
|  | administrative expenses are paid that funds will be | Yes.   |  |  |  |  |  |
|  | available for distribution                          |  |  |  |  |  |  |
| AUGUSTS                                | to unsecured creditors?                             |  |  |  |  |  |  |
| 3.                                     | How many creditors do                               | 1-49   | 1,000-5,000  | 25,001-50,000  |  |  |  |
|  | you estimate that you                               | □ 50 <b>-</b> 99   | 5,001-10,000   | 50,001-100,000   |  |  |  |
|  | owe?  | ☐ 100-199<br>☐ 200-999   | ☐ 10,001-25,000  | ☐ More than 100,000  |  |  |  |
| <br>Э.                                 | How much do you                                     | <b>\$0-\$50,000</b>  | ☐ \$1,000,001-\$10 million   | □\$500,000,001-\$1 billion   |  |  |  |
| ٥.                                     | estimate your assets to                             | \$50,001-\$100,000   | ☐ \$10,000,001-\$50 million  | □\$1,000,000,001-\$10 billion                                      |  |  |  |
|  | be worth?   | \$100,001-\$500,000  | ☐ \$50,000,001-\$100 million   | ======================================                             |  |  |  |
|  |   | ☐ \$500,001-\$1 million  | ☐ \$100,000,001-\$500 million  | ☐More than \$50 billion  |  |  |  |
| o.                                     | How much do you                                     | <b>\$0-\$50,000</b>  | ☐ \$1,000,001-\$10 million   | ☐ \$500,000,001-\$1 billion  |  |  |  |
|  | estimate your liabilities                           | \$50,001-\$100,000   | ☐ \$10,000,001-\$50 million  | \$1,000,000,001-\$10 billion                                       |  |  |  |
|  | to be?  | <b>\$100,001-\$500,000</b>   | ☐ \$50,000,001 <b>-</b> \$100 million  | ☐ \$10,000,000,001-\$50 billion                                    |  |  |  |
|  | <del></del>   | ☐ \$500,001-\$1 million  | ☐ \$100,000,001-\$500 million  | ☐ More than \$50 billion   |  |  |  |
| Pa                                     | art 7: Sign Below                                   |  |  |  |  |  |  |
| Fo                                     | r you   | I have examined this petition, and correct.  | I declare under penalty of perjury that the info   | ormation provided is true and                                      |  |  |  |
|  |   | If I have chosen to file under Chap<br>of title 11, United States Code. I u<br>under Chapter 7.            | oter 7, I am aware that I may proceed, if eligib<br>nderstand the relief available under each cha          | le, under Chapter 7, 11,12, or 13<br>pter, and I choose to proceed |  |  |  |
|  |   | If no attorney represents me and I this document, I have obtained an                                       | did not pay or agree to pay someone who is dread the notice required by 11 U.S.C. § 342                    | not an attorney to help me fill out<br>2(b).                       |  |  |  |
|  |   | I request relief in accordance with  | the chapter of title 11, United States Code, s   | pecified in this petition.   |  |  |  |
|  |   | I understand making a false state<br>with a bankruptcy case can result<br>18 U.S.C. §§ 152, 1341, 1519, an | ment, concealing property, or obtaining mone<br>in fines up to \$250,000, or imprisonment for a<br>d 3571. | y or property by fraud in connection<br>up to 20 years, or both.   |  |  |  |
|  |   | * (indiata )   | furila ×   | of Debter 2  |  |  |  |
|  |   | Signature of Debtor 1  | Sign   | ature of Debtor 2  |  |  |  |
|  |   | Executed on _ : _ <b>9</b> / <u>7</u>  | /2017 Exec   | cuted on   |  |  |  |
|  |   | MM / DD  | / YYYY   | MM / DD / YYYY   |  |  |  |

Debtor 1

First Name

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| Fill in this in           | formation to ide    | ntify your case:                     |                     |
|---------------------------|---------------------|--------------------------------------|---------------------|
| Debtor 1                  | Andrea              | Louise                               | Viverito            |
|                           | First Name          | Middle Name                          | Last Name           |
| Debtor 2                  |                     |                                      |                     |
| (Spouse, if filing)       | First Name          | Middle Name                          | Last Name           |
| United States             | Bankruptcy Court fo | or the : <u>NORTHERN</u> District of | ILLINOIS<br>(State) |
| Case Number<br>(If known) | r                   |                                      |                     |

# Official Form 106 Dec

# **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| ı  |   | Sign Below  | . <u> </u>                 |   |  |  |  |  |
|--|---|---|----------------------------|---|--|--|--|--|
| Accession of the control of the cont | Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? |   |                            |   |  |  |  |  |
|  | No  |   |                            | peranent  |  |  |  |  |
| Marian American  | Yes   | . Name of Person  |                            | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |  |  |  |  |
| WARNEST TRANSPORT TO SHARE THE   |   |   |                            |   |  |  |  |  |
| MANAGE AND   |   |   |                            |   |  |  |  |  |
|  |   | enalty of perjury, I declare that I have read the summary | and schedules filed with t | his declaration and that they are true and  |  |  |  |  |
| MANAGEMENT CONTRACTOR OF THE C | correct.  | andria Tiverita   | Signature of Debtor 2      |   |  |  |  |  |
|  | Date  | 9,7   | DateMM / DD / YY           | <del></del>   |  |  |  |  |
| www  |   |   |                            |   |  |  |  |  |

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| Debtor 1 Andrea Louise Viverito Case Number (if known) |   | Case Number (if known)  |   |  |  |  |  |
|--|---|---|---|--|--|--|--|
| •  | First Name  | Middle Name   | Last Name                               |  |  |  |  |
| Server reconstruction                                  | Andrea Viverito   |   | Describe the nature of the business     | Employer Identification number  Do not include Social Security number or   |  |  |  |
|  | 29 Cour Montreal  |   | Home Healthcare                         | AND THE PARTY OF T |  |  |  |
|  | Palos Hill, IL 60465  | <u></u>   |   | EIN:   |  |  |  |
|  |   |   | Name of accountant or bookkeeper        | Dates business existed   |  |  |  |
|  |   |   |   | 2017   |  |  |  |
|  | Andrea's Housekeeping   |   | Describe the nature of the business     | Employer Identification number   |  |  |  |
|  | 29 Cour Montreal  |   | Loughearing                             | Do not include Social Security number or   |  |  |  |
|  | Palos Hill, IL 60465  |   | Housekeeping                            | EIN:   |  |  |  |
|  |   |   | WW 400000000000000000000000000000000000 | one control of the co |  |  |  |
|  |   | _   | Name of accountant or bookkeeper        | Dates business existed   |  |  |  |
|  |   |   |   | 2010-2016  |  |  |  |
|  | No.  Yes. Fill in the details.  Date issued  Part 12: Sign Below  |   |   |  |  |  |  |
| an:<br>in  | I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. |   |   |  |  |  |  |
| 18 U.S.C. §§ 152, 1341, 1519, and 3571.                |   |   |   |  |  |  |  |
|  | · lihedrin  | Vius  | ila 🗴                                   | _  |  |  |  |
| , ,  | Signature of Debtor 1   | 3 00-07   | ebtor 2                                 |  |  |  |  |
| 300000000000000000000000000000000000000                | 9.7   | 117   | Dete                                    |  |  |  |  |
|  | Date / / / /20<br>MM / DD / YY  | YY  | Date                                    | JD / YYYY  |  |  |  |
| Di   | id you attach additional p  | u attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? |   |  |  |  |  |
| I  |   |   |   |  |  |  |  |
| 1 -  | Yes   |   |   |  |  |  |  |
| D  | Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?   |   |   |  |  |  |  |
| ■ No   |   |   |   |  |  |  |  |
| į  | Yes. Name of person   |   |   | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).  |  |  |  |
| ***************************************                |   |   |   |  |  |  |  |

Record # 751406

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Debtor 1

Andrea

Louise

<u>∨i**⊅o**cume</u>nt

Middle Name First Name

List Your Unexpired Personal Property Leases

| d Unexpired Leases (Official Form 106G),   |  |  |  |  |
|--|--|--|--|--|
| ill in effect; the lease period has not yet  |  |  |  |  |
| ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2). |  |  |  |  |
| Will the lease be assumed?   |  |  |  |  |
| □ No   |  |  |  |  |
| Yes  |  |  |  |  |
|  |  |  |  |  |
| □ No   |  |  |  |  |
| Yes  |  |  |  |  |
|  |  |  |  |  |
| □No  |  |  |  |  |
| Yes  |  |  |  |  |
|  |  |  |  |  |
| □No  |  |  |  |  |
| ☐Yes   |  |  |  |  |
| □No  |  |  |  |  |
| □Yes   |  |  |  |  |
| □No  |  |  |  |  |
| □Yes   |  |  |  |  |
| □ No   |  |  |  |  |
| ☐ Yes  |  |  |  |  |
|  |  |  |  |  |
| estate that secures a debt and any   |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
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|  |  |  |  |  |

Filed 09/07/17 Entered 09/07/17 16:30:05 Case 17-26845 Doc 1 Desc Main Louise Discument Page 51 of 4 umber (if known) \_ Andrea Debtor 1 First Name Column A Column B Debtor 2 or Debtor 1 non-filing spouse \$ 0.00 0.00 8. Unemployment compensation Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here..... For you ..... For your spouse ..... 9. Pension or retirement income. Do not include any amount received that was a \$ 1,271.00 0.00benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total on line10c. 0.00 0.00 10a. 0.00 \$ 0.000.00 0.00 10c. Total amounts from separate pages, if any. 11. Calculate your total current monthly income. Add lines 2 through 10 for each 3,287.67 0.00 3,287.67 column. Then add the total for Column A to the total for Column B. Determine Whether the Means Test Applies to You Part 2: 12. Calculate your current monthly income for the year. Follow these steps: 12a. 3,287.67 x 12 Multiply by 12 (the number of months in a year). 39,452.04 12b. 12b. The result is your annual income for this part of the form. 13. Calculate the median family income that applies to you. Follow these steps: Fill in the state in which you live. ١L 2 Fill in the number of people in your household. 66,487.00 Fill in the median family income for your state and size of household. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 14. How do the lines compare? 14a. X Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. Go to Part 3. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. Go to Part 3 and fill out Form 122A-2. Part 3: Sign Below By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. **Andrea Louise Viverito** /2017 If you checked line 14a, do NOT fill out or file Form 122A-2. If you checked line 14b, fill out Form 122A-2 and file it with this form.

# Case 17-26845 Doc 1 Filed 09/07/17 Entered 09/07/17 16:30:05 Desc Main DISCLAIMER Descriptions have read and agree:

- 1. Divorce or family support debts to a spouse, ex-spouse, child, guardian ad litem or similar person or entity in connection with a separation agreement, divorce decree or court order are not dischargable. Priority support debts must be paid in full in your Chapter 13 or it cannot be confirmed. DEBTS YOU AGREED TO ASSUME IN MARITAL SETTLEMENT AGREEMENTS are NON-DISCHARGEABLE if your ex-spouse files an adversary complaint, and the Judge rules that (a) you do not have the ability to pay the debt OR (b) discharging such debt would result in a benefit to you that outweighs the detriment to ex-spouse or your child. You agree to get advice in writing from your divorce attorney and send to us with copy of agreement. You must list any ex-spouse or spouse as a creditor. No guarantee any divorce debt is dischargeable. Property you are still on title to, or have a right to in a divorce, may be taken by a Bankruptcy trustee in a Chapter 7 and sold, or may be disposable income in a 13.
- 2. Student loans and educational benefits are not discharged in Chapter 7 or 13 if government insured loan or owed to non-profit school unless you pay us to file a complaint within the bankruptcy to prove repayment would be an "undue hardship", and win. Interest on student loans continue to run while you are in a Chapter 13.
- 3. Cosigners, joint applicants, debts of persons other than debtor, debts incurred during marriage in community property states, or for family support are not discharged and joint, community or co-signers are not protected from collection unless you pay 100% of the debt. Creditors can collect from co-signors and put your bankruptcy on their credit report, and report them negatively to credit bureaus. You may prevent this by making the regular payments to the creditor. Creditors can liquidate collateral of your co-signer and refuse to continue payment in installments. Property you are joint on with other persons can be LIQUIDATED to pay your creditors.
- 4. TAX DEBTS. Most taxes are not discharged in bankruptcy. However, income tax debt (1040 type tax) can be discharged if the following four rules are met:

  (1). The tax return was DUE at least 3 YEARS (plus extensions) before the filing of your bankruptcy case. (2). You FILED your income tax return at least 2 YEARS before your bankruptcy was filed. (You did not file a return if the tax authority or IRS had to file one for you, or if you didn't send the return to the District Director) (3). You did not wilfully intend to evade the tax. (4). The tax must have been ASSESSED over 240 DAYS before the bankruptcy filing. We recommend you meet with the IRS or state department of revenue to make sure all the conditions have been met, before you hire us or file a bankruptcy. Fraudulent taxes and taxes on unfiled returns can be discharged in a Chapter 13 case. Time in an offers in compromise, & time in bankruptcy plus 6 months, will extend the above time periods. Employers' share of FICA & FUTA is dischargeable, but not trust fund taxes like the employee's funds or sales tax.
- 5. Fines, traffic tickets, parking tickets, penalties to governmental unit are not discharged in Chapter 7, may not be discharged in 13 without full payment.
- 6. Non filing spouse: If you file individually, your spouse is not our client. Only your debts are discharged. If you want to protect a non-filing spouse, pay their bills or file a joint case with them. Family expenses (medical bills, rent and necessities may be collected from a non-filing spouse). Wisconsin, community property is liable for community debts. 7. DUI PERSONAL INJURIES, DEBTS YOU DON'T LIST are not discharged.
- 8. DEBTS where creditors successfully object to discharge may survive Creditors, the Trustee, or Court, can try to deny discharge based on many factors,
- a. Income sufficient to pay a percentage of your unsecured debt. b. Failure to keep books and records documenting your financial affairs. c. Luxury purchases or cash advances within 60 days of filing or without intent or ability to repay. d. Debts you made by false pretenses, breach of fiduciary duty, wilful and malicious injuries to others e. Benefit overpayments like aid or unemployment if a determination of fraud has been made before or during bankruptcy. f. Failure to appear at meetings, court dates, or co-operate with the Trustee.
- 9. INTEREST ON NON-DISCHARGEABLE DEBTS in a Chapter 13 continues to accrue, and CREDITORS WHO DO NOT FILE CLAIMS in your Chapter 13 plan within 90 days (180 days for governmental units) of the meeting of creditors, do not get paid. Your plan and their claim should provide for interest at contract rate, or you will have to pay the debt outside the Chapter 13 plan. Property taxes must be paid by you directly to avoid sale for delinquent taxes.
- 10. LIQUIDATION OF REAL AND PERSONAL PROPERTY. If you file a Chapter 7, any property that is not listed and claimed exempt on Schedule C pursuant to state or federal law is taken and sold by the trustee to pay creditors. You agree to assume the risk that your property will be taken and sold by the bankruptcy trustee (at or less than what it is worth) if we can't protect it under applicable state law. You get a discharge, but the trustee can take property not listed and exempted on schedules B and C and sell it for whatever price will provide some benefit to creditors.
- 11. CHANGE IN LAWS. Laws & court cases change constantly. We can file your case today if you pay us in full (some attorneys give credit, we don't) pay the filing fee and sign your petition in our main office. ANY DELAY either in hiring us, or after, IS YOUR REPSONSIBILITY. ADVERSE RULINGS Judges that sit in adjoining courtrooms can rule differently on the same facts. We can predict but can't guarantee a judge will or will not rule against you. You accept the risk of a judge ruling against you, as in any lawsuit.
- 12. PAYMENTS TO CREDITORS YOU PREFERRED to pay more than \$600 in front of others, within 1 yr if a relative or insider, or within 90 days if another creditor, so don't pay off debts to keep credit cards or protect others. TRANSFERS OF PROPERTY within 4 years that made you unable to pay your debts at the time can be reversed by a Trustee and the transferee will have to give back the property you transferred.
- 13. SURRENDER OF PROPERTY Bankruptcy gets rid of debts, but real estate, condos and time shares remain in your name until a foreclosure sale or the lender accepts a deed in lieu of foreclosure. Turn condo keys over to condo association or remain liable for assessments after filing, and make sure you keep buildings & land insured and maintained and secured until it is taken back by lender or out of your name. If you let a house go vacant and pipes explode or someone gets killed in there you may be liable.
- 14. RIGHT TO RECEIVE inheritances, tax refunds, injury claims, compensation of any kind, insurance or realty commissions, are property of the bankruptcy estate and you will surrender these to the trustee unless they are claimed exempt on Schedule C, and no objection to your claim of exemption is upheld. Do not deduct extra money from taxes so you are entitled to a refund, change your W-9 if necessary.
- 15. JOINT ACCOUNT HOLDERS holders entire amount in the account could be taken by the trustee under Chapter 7.
- 16. MARRIED COUPLES GOING THROUGH DIVORCE: We have been advised to seek independent counsel for our bankruptcy. We understand that Peter Francis Geraci does not represent us with regard to any divorce matters and does not make any representations regarding what will happen in divorce court. We have decided to file a bankruptcy together dispite the fact that we are getting a divorce and our interests could be adverse. We have agreed to cooperate with each other in this joint bankruptcy.
- 17. AUTO LEASES & INSTALLMENT AGREEMENTS to purchase things, leases and almost all contracts will be void after bankruptcy. They are "executory contracts", and if they are of no benefit to the bankruptcy estate and not assumed within 60 days of filing, they are void. Debtors have been warned of this, and unless there is a novation under state law, or agreement not to use bankruptcy to void the contract, the debtors rights under the contract are extinguished. Debtor agrees to be responsible for obtaining such agreements or losing rights under such contracts. Debtor agrees that his or her attorney will not file motions to assume such contracts.

| 18. Setoffs if you have money in a credit union or creditor account, or other loans that cross-collateralized, any money or property may be        | taken for both loans.   |
|--|-------------------------|
| The Undersigned have read the above & assume the risk that a debt is not discharged in bankruptcy, that our non-exempt property will be            | taken and sold by the   |
| bankruptcy trustee if it can't be protected, that the trustee might object if Lyve have excess income, or change in State, Federal or Bankrupt     | cy laws before the case |
| bankruptcy trustee if it can't be protected, that the trustee might object if the rate excess income, or daining in otatic, if exerting bankruptcy | oy (and 2010) 0 1110    |
| is filed in Court AND WE HAVE TO READ, CHECK, & MAKE SURE OUR PETITION IS ACCOUNTED.   |                         |

| s filed in Court AND WE HAVE TO READ, CHEC | K, & MAKE SURE OUR PETITION IS ACCOPRATE!!!! |               |
|--|--|---------------|
| Dated:/2017                                | progra & jurila                              | X Date & Sign |
|  | Andrea Louise Viverito                       |               |

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# UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re

Andrea Louise Viverito / Debtor

Bankruptcy Docket #:

Judge:

# **VERIFICATION OF CREDITOR MATRIX**

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

<sup>\*</sup> Joint debtors must provide information for both spouses. Penalty for making a false statement or concealing property: Fine up to \$500,000 or up to 5 years imprisonment or both. 18 U.S.C. 152 and 3571.

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Form B 201A, Notice to Consumer Debtor(s)

In re Andrea Louise Viverito / Debtor

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found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

# <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

# Chapter 11: Reorganization (\$1,167 filling fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

## 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

**Andrea Louise Viverito** 

X Date & Sign

Dated: 9 / 7 /2017

Attorney: Steven Camp